

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF IOWA

Case number (if known)

Chapter

11

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Sivyer Steel Corporation

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 39-0617810

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

225 S. 33rd Street
Bettendorf, IA 52722

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Scott

County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) www.sivyersteel.com

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))☐ Partnership (excluding LLP)☐ Other. Specify: _____

Debtor **Sivyer Steel Corporation**
Name

Case number (if known)

7. Describe debtor's business**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

3315**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. **Check all that apply:**

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **Sivyer Steel Corporation**
Name

Case number (if known)

11. Why is the case filed in this district?*Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (*Check all that apply.*)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other _____**Where is the property?** _____

Number, Street, City, State & ZIP Code

Is the property insured?☐ No☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds***Check one:*

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors☐ 1-49☐ 50-99☐ 100-199☒ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☒ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☒ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Sivyer Steel Corporation**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **March 14, 2018**
MM / DD / YYYY

X /s/ Keith Kramer

Signature of authorized representative of debtor

Keith Kramer

Printed name

Title **President**

18. Signature of attorney

X /s/ Jeffrey D. Goetz

Signature of attorney for debtor

Date **March 14, 2018**

MM / DD / YYYY

Jeffrey D. Goetz

Printed name

Bradshaw, Fowler, Proctor & Fairgrave PC

Firm name

**801 Grand Avenue, Suite 3700
Des Moines, IA 50309-8004**

Number, Street, City, State & ZIP Code

Contact phone **515-243-4191**

Email address **www.bradshawlaw.com**

IS #9999366 IA

Bar number and State

Fill in this information to identify the case:

Debtor name **Sivyer Steel Corporation**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF IOWA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **March 14, 2018**

X /s/ Keith Kramer

Signature of individual signing on behalf of debtor

Keith Kramer

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Sivyer Steel Corporation**
 United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF IOWA**
 Case number (if known): _____

☐ Check if this is an
 amended filing

Official Form 204**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
First Insurance Funding 450 Skokie Blvd, Suite 1000 Northbrook, IL 60062-7917		Financing for insurance coverage for property, cargo, freight, liability insurance				\$902,028.01
General Electric Company 16201 Three Wide Drive E 206 Fort Worth, TX 76177						\$884,349.00
Canfield & Joseph, Inc. PO Box 471285 Tulsa, OK 74147		Foundry supplies provider				\$644,245.08
Shenyang Jinli Metals & Minerals Import & Export Co. Ltd Room 15-4 No. 22 Shenyang 110014 CHINA						\$465,895.22
JP Morgan Chase PO Box 4475 Carol Stream, IL 60197-4475						\$447,690.02
MidAmerican Energy Services, LLC PO Box 8019 Davenport, IA 52808-8019						\$319,297.40
Carpenter Brothers, Inc. Box 88113 Milwaukee, WI 53288-0113						\$297,302.27

Debtor **Sivyer Steel Corporation**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Godfrey & Kahn Bin #318 Milwaukee, WI 53288-0318						\$231,157.43
Richardson Manufacturing Co. 2209 Old Jacksonville Rd. Springfield, IL 62704		Machine Shop				\$227,925.50
Smith S J Welding Supply 3707 W. River Dr. Davenport, IA 52802		Gas cylinder, weld consumables, and safety provider				\$161,711.99
Ningbo Daming Precision Casting Co. Ltd. Hehua Bridge Yunlong Town Ningbo 315135 CHINA						\$148,787.36
BDI - Bearing Distributors Attn: Chip Gonezy 8000 Hub Parkway Cleveland, OH 44125		Maintenance material provider				\$146,701.79
Foundry Sand Service, LLC 5401 Victoria Dr. Suite 100 Davenport, IA 52807		Chromite provider				\$142,367.00
Alter Trading Corporation Lockbox 774903 4903 Solution Center Chicago, IL 60677-4009						\$139,430.33
American Colloid Co. NW 5020 PO Box 1450 Minneapolis, MN 55458-5020						\$137,925.80
ASI International LTD 1440 E 39th St. Cleveland, OH 44114		Alloy provider				\$129,985.74
Cores for You 160 Hamilton Industrial Park Hamilton, IL 62341						\$111,969.31

Debtor **Sivyer Steel Corporation**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
RIM Logistics Ltd Deptment 4026 PO Box 4653 Hinsdale, IL 60522-4653						\$109,840.07
Manley Brothers of Indiana, Inc. PO Box 80 300 S. Vermillion st. Troy Grove, IL 61372-0080		Silica provider				\$101,696.68
MidAmerican Energy PO Box 8020 Davenport, IA 52808-8020		Utilities				\$91,683.60

Fill in this information to identify the case:Debtor name **Sivyer Steel Corporation**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF IOWA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **3,300,000.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **13,139,012.42****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **16,439,012.42****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **8,700,242.57****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **9,654,706.48****4. Total liabilities**
Lines 2 + 3a + 3b\$ **18,354,949.05**

Fill in this information to identify the case:

Debtor name **Sivyer Steel Corporation**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF IOWA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **TBK Bank SSB - Subject to further accounting and audit****four checking accounts****\$0.00**4. **Other cash equivalents** (Identify all)5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. **Prepayment to Macawber Engineering, Inc. for services not yet performed and/or raw materials not yet received****\$1,158.00**8.2. **Prepayment to Mid-States Specialty Sales for services not yet performed and/or raw materials not yet received****\$976.00**

Debtor Sivyer Steel Corporation Case number (If known) _____
Name

8.3.	Prepayment to MX Industrial Distributors for services not yet performed and/or raw materials not yet received	\$995.00
8.4.	Prepayment to Ningbo Qianhao Metal Product Co. Ltd. for services not yet performed and/or raw materials not yet received	\$44,204.00
8.5.	Prepayment to Ningbo Yinzhou Dingja Mold Factory for services not yet performed and/or raw materials not yet received	\$374.00
8.6.	Prepayment to Ningbo Yong Chao Mould Co. Ltd. for services not yet performed and/or raw materials not yet received	\$16,650.00
8.7.	Prepayment to Plant Equipment Co. Inc. for services not yet performed and/or raw materials not yet received	\$1,756.00
8.8.	Prepayment to Pride Machine & Tool, Inc for services not yet performed and/or raw materials not yet received	\$4,580.00
8.9.	Prepayment to Quad City Testing Lab, Inc. for services not yet performed and/or raw materials not yet received	\$1,184.00
8.10.	Prepayment to RAFAMET S.A. for services not yet performed and/or raw materials not yet received	\$7,630.00
8.11.	Prepayment to R-Con NDT, Inc. for services not yet performed and/or raw materials not yet received	\$18,358.00
8.12.	Prepayment to Recycling Solutions & Consultants for services not yet performed and/or raw materials not yet received	\$33,880.00
8.13.	Prepayments to Refractory & Insulation Supply, Inc. for services not yet performed and/or raw materials not yet received	\$49,650.00
8.14.	Prepayment to Republic Companies for services not yet performed and/or raw materials not yet received	\$787.00
8.15.	Prepayment to Rilco Fluid Care, Inc. for services not yet performed and/or raw materials not yet received	\$1,965.00
8.16.	Prepayments to Rock Island Lubricants, Inc. for services not yet performed and/or raw materials not yet received	\$2,385.00

Debtor Sivyer Steel Corporation Case number (If known) _____
Name

8.17 Prepayments to RSSI for services not yet performed and/or raw materials not yet received \$95.00

8.18 Prepayments to Rogan, Inc. for services not yet performed and/or raw materials not yet received \$1,845.00

8.19 Prepayments to Simmers Crane Design & Service for services not yet performed and/or raw materials not yet received \$2,600.00

8.20 Prepayments to Smith S J Welding Supply for services not yet performed and/or raw materials not yet received \$16,283.00

8.21 Prepayment to Tag Communications, Inc. for services not yet performed and/or raw materials not yet received \$73.00

8.22 Prepayments to Tinker Omega Mfg. for services not yet performed and/or raw materials not yet received \$2,264.00

8.23 Prepayment to Tool House, Inc. for services not yet performed and/or raw materials not yet received \$1,445.00

8.24 Prepayment to Trimborn Tooling Design, LLC for services not yet performed and/or raw materials not yet received \$2,500.00

8.25 Prepayments subject to additional accounting and audit \$100,000.00

9. Total of Part 2. \$313,637.00
Add lines 7 through 8. Copy the total to line 81.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. Accounts receivable
11a. 90 days old or less: 2,124,086.00 - 0.00 = \$2,124,086.00
face amount doubtful or uncollectible accounts

12. Total of Part 3. \$2,124,086.00
Current value on lines 11a + 11b = line 12. Copy the total to line 82.

Part 4: Investments

Debtor Sivyer Steel Corporation

Case number (If known) _____

Name

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
- ☐ Yes Fill in the information below.

Part 5: **Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
- ☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials Raw Materials -	2/24/18	Unknown	cost basis	\$1,190,278.73
20.	Work in progress work in process	12/31/17	Unknown	Cost Basis	\$4,078,636.00
21.	Finished goods, including goods held for resale Finished Goods	12/31/17	Unknown	cost basis	\$1,102,390.00
	Finished goods in transit	12/31/17	Unknown	cost basis	\$67,745.00
22.	Other inventory or supplies Maintenance Inventory	12/31/17	Unknown	cost basis	\$1,144,879.69

23. Total of Part 5.

Add lines 19 through 22. Copy the total to line 84.

\$7,583,929.42

24. Is any of the property listed in Part 5 perishable?

- ☒ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
- ☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 6: **Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes Fill in the information below.

Part 7: **Office furniture, fixtures, and equipment; and collectibles**

Debtor **Sivyer Steel Corporation**
Name

Case number (If known) _____

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
- ☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture			
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Computer monitors, laptops, TV's, desktop computer, printers, routers, phones, servers - Subject to further accounting and audit	Unknown		Unknown

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$0.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No
- ☒ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☐ No
- ☒ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
- ☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1.	1998 Chevrolet C350 - Maintenance Truck	Unknown		Unknown
47.2.	2011 Freightliner Mw 106MD Leased Flatbed Truck from Ryder	Unknown		Unknown
47.3.	1995 GMC Stake Truck - flatbed truck	Unknown		Unknown
47.4.	2008 PJ Flatbed Trailer - trailer for patterns	Unknown		Unknown

Debtor Sivyer Steel Corporation

Case number (If known) _____

Name

47.5. 2013 Ford F250 - pattern truck

Unknown

Unknown

47.6. 1994 Ford F250 - Snowplow truck

Unknown

Unknown

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**
Machinery and Equipment appraised value as of 7/19/2017

Unknown

Appraisal

\$3,117,360.00

51. **Total of Part 8.**
Add lines 47 through 50. Copy the total to line 87.

\$3,117,360.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**
☐ No
☒ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**
☐ No
☒ Yes

Part 9: **Real property**

54. **Does the debtor own or lease any real property?**

☐ No. Go to Part 10.

☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. <u>225 S. 33rd St., Bettendorf, Iowa</u>	<u>Fee simple</u>	<u>Unknown</u>	<u>Appraisal</u>	<u>\$3,300,000.00</u>
55.2. <u>200 S. Bellingham, Bettendorf, Iowa (Building 1 and 3 leased from Meadows Warehousing Company)</u>	<u>Lessee</u>	<u>Unknown</u>		<u>\$0.00</u>

Debtor **Sivyer Steel Corporation**

Case number (If known)

Name

55.3. 200 S. Bellingham, Bettendorf, Iowa (Building 2 and 4 leased from Meadows Warehousing Company)

Lessee

Unknown

\$0.00

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$3,300,000.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

☒ No

☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
- ☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties Multiple Export Licenses issued by the US Dept of Commerce Bureau of Industry and Security.	Unknown		\$0.00
Iowa Department of Natural Resources Title V Air Quality Operating Permit expires 3/31/2019	Unknown		\$0.00
City of Davenport Public Works Department Industrial Wastewater Discharge Permit #C-B-057 expires 4/1/08	Unknown		\$0.00
State of Iowa Storm Water Discharge NPDES General Permit ISA1173-1462 expires 9/30/2018	Unknown		\$0.00
63. Customer lists, mailing lists, or other compilations			
64. Other intangibles, or intellectual property			
65. Goodwill			

Debtor Sivvyer Steel Corporation Case number (If known) _____
Name

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)

☒ No

☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

☒ No

☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

Debtor **Sivyer Steel Corporation**
Name

Case number (If known)

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$313,637.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$2,124,086.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$7,583,929.42	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$3,117,360.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$3,300,000.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$13,139,012.42	\$3,300,000.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$16,439,012.42

Fill in this information to identify the case:Debtor name **Sivyer Steel Corporation**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF IOWA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.*Column A***Amount of claim**

Do not deduct the value of collateral.

*Column B***Value of collateral that supports this claim****2.1 Dell Financial Services L.L.C.**

Creditor's Name

**Mail Stop-PS2DF-23
One Dell Way
Round Rock, TX 78682**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**4-4-16****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**

- ☒ No
- ☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien
server equipment**\$3,724.98****\$3,724.98****Describe the lien****Wisconsin UCC Financing Statment****Is the creditor an insider or related party?**

- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☒ No
- ☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

- Check all that apply
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

2.2 FCF Partners, LP

Creditor's Name

**515 Crescent Lane
Thiensville, WI 53092**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**9-8-16****Last 4 digits of account number****Do multiple creditors have an interest in the same property?****Describe debtor's property that is subject to a lien**
substantially all assets**\$300,000.00****\$300,000.00****Describe the lien****Junior/Subordinated Security
Interest/Mortgage****Is the creditor an insider or related party?**

- ☐ No
- ☒ Yes
- Is anyone else liable on this claim?**
- ☒ No
- ☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Debtor **Sivyer Steel Corporation**

Case number (if know)

Name

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed**2.3 Komatsu Mining**

Creditor's Name

**4400 West National Ave
Milwaukee, WI 53214-3684**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

manufactured goods**\$628,000.00****\$628,000.00**

Describe the lien

junior/subordinate security interest

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.4 Meadows Warehousing Company**

Creditor's Name

**Attn: Sue Jarvis, President
PO Box 1720
Bettendorf, IA 52722**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Rent from March 2017 to March 2018**\$273,664.79****\$273,664.79**

Describe the lien

Secured lease creditor

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.5 Scott County Treasurer**

Creditor's Name

**600 W 4th St.
Davenport, IA 52801-1003**

Creditor's mailing address

Describe debtor's property that is subject to a lien

Property Taxes**\$49,476.00****\$49,476.00**

Describe the lien

Is the creditor an insider or related party?

☒ No

Debtor **Sivyer Steel Corporation**

Case number (if know)

Name

Creditor's email address, if known

☐ Yes

Is anyone else liable on this claim?

Date debt was incurred

☒ No

Last 4 digits of account number

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.6 TBK Bank SSB**

Creditor's Name

**fka Triumph Community Bank NA
852 Middle Rd.
Bettendorf, IA 52722**

Creditor's mailing address

Describe debtor's property that is subject to a lien

225 S. 33rd St., Bettendorf, Iowa**\$7,440,370.00****\$7,440,370.00**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

Blanket security interest; UCC; Mortgage

Is the creditor an insider or related party?

☐ No☒ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.7 U.S. Bank Equipment Finance**

Creditor's Name

**1310 Madrid Street
Marshall, MN 56258**

Creditor's mailing address

Describe debtor's property that is subject to a lien

Leasing of IT Equipment**\$5,006.80****\$5,006.80**

Creditor's email address, if known

Date debt was incurred

1-10-14

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

Equipment Lease

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Debtor **Sivyer Steel Corporation**

Case number (if know)

Name

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$8,700,242.57

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
Meadows Warehousing company 2250 W 76th St Davenport, IA 52806	Line <u>2.4</u>	
TBK Bank SSB c/o J. Mark Fisher, Esq. Schiff Hardin LLP 233 S. Wacker Dr., Ste. 7100 Chicago, IL 60606	Line <u>2.6</u>	
TBK Bank, SSB c/o Richard A. Davidson 220 N. Main St. Suite 600 Davenport, IA 52801-1987	Line <u>2.6</u>	
US Bank Equipment Finance PO Box 790448 Saint Louis, MO 63179-0448	Line <u>2.7</u>	

Fill in this information to identify the case:Debtor name **Sivyer Steel Corporation**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF IOWA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown \$0.00
2.2	Priority creditor's name and mailing address Iowa Department of Revenue Hooover State Office Building PO Box 10471 Des Moines, IA 50306-0471 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown \$0.00

Debtor	Sivyer Steel Corporation	Case number (if known)	
	Name		

2.3	Priority creditor's name and mailing address Iowa Workforce Development Unemployment Insurance Tax Bureau 1000 East Grand Ave. Des Moines, IA 50319	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred	Basis for the claim: notice only		
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address 2 & 92 Used Truck Parts, Inc. PO Box 181 Silvis, IL 61282 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$159.38
3.2	Nonpriority creditor's name and mailing address A & A Air Conditioning, Inc. 201 48th St Moline, IL 61265 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ice machines</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,233.65
3.3	Nonpriority creditor's name and mailing address A L L Equipment PO Box 909 Moline, IL 61265 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,179.46
3.4	Nonpriority creditor's name and mailing address Acadian Lawn & Landscape 1921 127th Ave Milan, IL 61264 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lawn and landscape maintenance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,103.20
3.5	Nonpriority creditor's name and mailing address Acro Manufacturing Corporation 5429 North Towne Place Cedar Rapids, IA 52402 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$88,416.67

Debtor	Name	Case number (if known)
3.6	Nonpriority creditor's name and mailing address ADP Commercial Leasing, LLC 15 Waterview Blvd. Parsippany, NJ 07054 Date(s) debt was incurred <u>10/23/15</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,391.09 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Payroll implementation fee/outside payroll processor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address ADP, LLC PO Box 842875 Boston, MA 02284-2875 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$26,942.20 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address Advanced Business Systems 4631 44th St. Moline, IL 61265 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,678.06 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address Advanced Environ. Testing & Abatement 7224 Jebens Ave Davenport, IA 52806 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address Aeromet Engineering Inc. 107 Adams St. Jefferson City, MO 65101 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$370.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	Nonpriority creditor's name and mailing address Aerotek Commercial Staffing, Inc. PO Box 198531 Atlanta, GA 30384-8531 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$37,821.98 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	Nonpriority creditor's name and mailing address Aerotek, Inc. c/o Blitt and Gaines, P.C. 2536 73rd Street Urbandale, IA 50322 Date(s) debt was incurred <u>10-25-17</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Scott County LACE129351</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			
3.13	Nonpriority creditor's name and mailing address Ahlers & Cooney, P.C. 100 Court Ave, Suite 600 Des Moines, IA 50309 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>legal services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$90.00</u>
3.14	Nonpriority creditor's name and mailing address Airgas USA, LLC PO Box 802576 Chicago, IL 60680-2576 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Bulk gas provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$30,143.17</u>
3.15	Nonpriority creditor's name and mailing address Airrco LLC 4 Deerwood Dr. Blue Grass, IA 52726 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,250.00</u>
3.16	Nonpriority creditor's name and mailing address Alignex, Inc. 7200 Metro Blvd Edina, MN 55439 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,434.98</u>
3.17	Nonpriority creditor's name and mailing address Allied Electronics Accts Receivable Dept PO Box 2325 Fort Worth, TX 76113 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,110.95</u>
3.18	Nonpriority creditor's name and mailing address Alltest, Inc. 4711 Brady St. Suite 35 Davenport, IA 52806-3955 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,064.50</u>
3.19	Nonpriority creditor's name and mailing address Alter Trading Corporation Lockbox 774903 4903 Solution Center Chicago, IL 60677-4009 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$139,430.33</u>

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			
3.20	Nonpriority creditor's name and mailing address Altorfer Rents PO Box 1347 Cedar Rapids, IA 52406-1347 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,966.52
3.21	Nonpriority creditor's name and mailing address Altorfer, Inc. PO Box 1347 Cedar Rapids, IA 52406-1347 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,505.00
3.22	Nonpriority creditor's name and mailing address Ameralloy Steel Corporation 7848 N. Merrimac Lisle, IL 60532-7090 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,068.94
3.23	Nonpriority creditor's name and mailing address Ameri-source Specialty Products, Inc. 5372 Enterprise Blvd Bethel Park, PA 15102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$62,286.94
3.24	Nonpriority creditor's name and mailing address American Colloid Co. NW 5020 PO Box 1450 Minneapolis, MN 55458-5020 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$137,925.80
3.25	Nonpriority creditor's name and mailing address American Electric Control Corp. 1600 W. 200 South Lindon, UT 84042 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,480.31
3.26	Nonpriority creditor's name and mailing address American Express PO Box 650448 Dallas, TX 75265-0448 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,754.52

Debtor	Sivyer Steel Corporation	Case number (if known)	
Name			
3.27	Nonpriority creditor's name and mailing address American Foundry Society 35169 Eagle Way Chicago, IL 60678-1351 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,620.00
3.28	Nonpriority creditor's name and mailing address American Pattern & CNC Works Inc. 5540 Westminster Dr. Cedar Falls, IA 50613-6948 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,500.00
3.29	Nonpriority creditor's name and mailing address Anderson Commercial Concrete, Inc. 21254 Brady St. Davenport, IA 52806 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,377.00
3.30	Nonpriority creditor's name and mailing address ASI International LTD 1440 E 39th St. Cleveland, OH 44114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Alloy provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$129,985.74
3.31	Nonpriority creditor's name and mailing address Ask Chemicals LP 495 Metro Place South, Ste. 250 Dublin, OH 43017 Date(s) debt was incurred <u>9-22-15</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>TP coat (2) raw material</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54,325.68
3.32	Nonpriority creditor's name and mailing address Auburn Systems, LLC 800 Cummings Centers Suite 355W Beverly, MA 01915 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,201.05
3.33	Nonpriority creditor's name and mailing address Audiology Consultants PC 2215 E 52nd St. Suite 2 Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,244.77

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			

3.34	Nonpriority creditor's name and mailing address B & E Pattern Co. N60 W152000 Bobolink Ave Menomonee Falls, WI 53051 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Pattern Shop Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,100.00
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3.35	Nonpriority creditor's name and mailing address B & L Information Systems, Inc. 4707 Rambo Rd. Bridgman, MI 49106 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,997.12
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3.36	Nonpriority creditor's name and mailing address Balcon 3215 Nebraska Ave Council Bluffs, IA 51501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$267.50
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3.37	Nonpriority creditor's name and mailing address Barton Solvents, Inc. PO Box 970 Bettendorf, IA 52722-0017 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$273.00
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3.38	Nonpriority creditor's name and mailing address Batteries & Bulbs 901 E. Kimberly Rd. Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Batteries & Bulbs supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$588.83
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3.39	Nonpriority creditor's name and mailing address BDI - Bearing Distributors Attn: Chip Gonezy 8000 Hub Parkway Cleveland, OH 44125 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Maintenance material provider Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$146,701.79
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3.40	Nonpriority creditor's name and mailing address Behr Iron & Metal 32500 Collection Center Dr. Chicago, IL 60693-0500 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,203.75
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Debtor	Sivyer Steel Corporation	Case number (if known)	
Name			
3.41	Nonpriority creditor's name and mailing address Berg Engineering & Sales, Inc. 3893 Industrial Ave Rolling Meadows, IL 60008 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,266.00
3.42	Nonpriority creditor's name and mailing address Big River Equipment Co. Inc. 5875 State St. Bettendorf, IA 52722 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,715.89
3.43	Nonpriority creditor's name and mailing address Blackhawk Specialty Products, Inc. Blackhawk Sales Company 2116 5th Ave Rock Island, IL 61201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$199.16
3.44	Nonpriority creditor's name and mailing address Block Ready Mix Group 3636 W. River Dr. Davenport, IA 52802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$479.72
3.45	Nonpriority creditor's name and mailing address Bodycote Thermal Processing 7316 Durand Ave Melrose Park, IL 60160 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$702.00
3.46	Nonpriority creditor's name and mailing address Bourn & Koch, Inc. JP Morgan Chase 36856 Eagle Way Chicago, IL 60678-1368 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95.00
3.47	Nonpriority creditor's name and mailing address Bowe Machine Co. PO Box 1570 Bettendorf, IA 52722-1570 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,168.76

Debtor	Name	Case number (if known)
3.48	Nonpriority creditor's name and mailing address Brake Products, Inc. PO Box 23547 Chagrin Falls, OH 43301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$6,035.67
3.49	Nonpriority creditor's name and mailing address Bremen Castings, Inc. PO Box 10762 Fort Wayne, IN 46853-0762 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$0.00
3.50	Nonpriority creditor's name and mailing address C-Spec PO Box 5188 Concord, CA 94524 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,040.00
3.51	Nonpriority creditor's name and mailing address The C.A. Lawton Co. 1950 Enterprise Dr. PO Box 5430 De Pere, WI 54115-5430 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,495.00
3.52	Nonpriority creditor's name and mailing address Cal-Rite Corporation 1665 Quincy Ave #103 Naperville, IL 60540 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,004.60
3.53	Nonpriority creditor's name and mailing address Canfield & Joseph, Inc. PO Box 471285 Tulsa, OK 74147 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Foundry supplies provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$644,245.08
3.54	Nonpriority creditor's name and mailing address Canon Financial Services, Inc. 14904 Collections Center Dr. Chicago, IL 60693-0149 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$4,148.00

Debtor	Sivyer Steel Corporation	Case number (if known)	
Name			
3.55	Nonpriority creditor's name and mailing address Carlin Automation Inc. PO Box 3431 1725 20th St. Rock Island, IL 61201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,029.87
3.56	Nonpriority creditor's name and mailing address Carpenter Brothers, Inc. Box 88113 Milwaukee, WI 53288-0113 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$297,302.27
3.57	Nonpriority creditor's name and mailing address CarQuest Auto Parts Stores PO Box 404875 Atlanta, GA 30384-4875 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$494.00
3.58	Nonpriority creditor's name and mailing address Cartridge World - Utica 5252 Utica Ridge Rd. Davenport, IA 52807-3872 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48.14
3.59	Nonpriority creditor's name and mailing address Caterpillar Financial Services Corp PO Box 730669 Dallas, TX 75373-0669 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,486.81
3.60	Nonpriority creditor's name and mailing address CDW Direct LLC PO Box 75723 Chicago, IL 60675-5723 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,017.69
3.61	Nonpriority creditor's name and mailing address CEM Corporation 12750 Collections Center Dr. Chicago, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,284.00

Debtor	Sivyer Steel Corporation		Case number (if known)
	Name		
3.62	Nonpriority creditor's name and mailing address Certified Laboratories 23261 Network Place Chicago, IL 60673-1232 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$379.09
3.63	Nonpriority creditor's name and mailing address CH Robinson Co. Inc. PO Box 9121 Minneapolis, MN 55480-9121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trucking Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,585.77
3.64	Nonpriority creditor's name and mailing address Chemsearch 23261 Network Place Chicago, IL 60673 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Water treatments</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,391.96
3.65	Nonpriority creditor's name and mailing address Christy Refractories Co. LLC PO Box 6167 Carol Stream, IL 60197-6167 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$83,600.00
3.66	Nonpriority creditor's name and mailing address Cintas Corporation #762 PO Box 631025 Cincinnati, OH 45263-1025 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,729.19
3.67	Nonpriority creditor's name and mailing address Citibank NA c/o SGS North America PO Box 2502 Carol Stream, IL 60132-2502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Testing of metals</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,662.00
3.68	Nonpriority creditor's name and mailing address Citrix Online, LLC File 50264 Los Angeles, CA 90074-0264 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,478.93

Debtor **Sivyer Steel Corporation** Case number (if known) _____
Name

3.69	Nonpriority creditor's name and mailing address Coface North America, Inc. c/o James L. O'Brien Assoc Inc. 1035 W. Lake St. Chicago, IL 60607-1726 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41,568.00
3.70	Nonpriority creditor's name and mailing address Communication Innovators Inc. 1301 NE 56th St. Pleasant Hill, IA 50327 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,008.36
3.71	Nonpriority creditor's name and mailing address Complete Heat Treating 125 E. Greenfield Ave Milwaukee, WI 53204-2937 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,100.00
3.72	Nonpriority creditor's name and mailing address Con-Way Freight PO Box 5160 Portland, OR 97208-5160 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,335.31
3.73	Nonpriority creditor's name and mailing address Conductix, Inc. PO Box 809090 Chicago, IL 60680 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,744.00
3.74	Nonpriority creditor's name and mailing address Continental Fire Sprinkler Co. 4518 S. 133rd St. Omaha, NE 68137 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,276.89
3.75	Nonpriority creditor's name and mailing address Control Application & Maintenance, Inc. 2832 5th St. Rock Island, IL 61201 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$717.10

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			

3.76	Nonpriority creditor's name and mailing address Control Specialists PO Box 6770 Evansville, IN 47719-0770 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$384.00
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3.77	Nonpriority creditor's name and mailing address Cores for You 160 Hamilton Industrial Park Hamilton, IL 62341 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$111,969.31
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3.78	Nonpriority creditor's name and mailing address Coventry Capital Partners, Inc. 250 W. Coventry Ct. Suite 201 Milwaukee, WI 53217 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$232,719.56
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3.79	Nonpriority creditor's name and mailing address Crack Eliminator PO Box 235 Oak Creek, WI 53154 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,722.00
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3.80	Nonpriority creditor's name and mailing address Crane Pro Parts PO Box 644994 Pittsburgh, PA 15264-4994 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,774.25
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3.81	Nonpriority creditor's name and mailing address Crescent Electric Supply Company c/o Piper Hughes, Esq. PO Box 2165 Cedar Rapids, IA 52406 Date(s) debt was incurred <u>12-27-16</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Scott County LACE128218</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,204.53
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3.82	Nonpriority creditor's name and mailing address CS Technologies PO Box 260 Eldridge, IA 52748-0260 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,536.72
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Debtor	Name	Case number (if known)
3.83	Nonpriority creditor's name and mailing address CT Corporation PO Box 4349 Carol Stream, IL 60197-4349 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$162.80
3.84	Nonpriority creditor's name and mailing address CT Products, LLC c/o McDonald, Woodward & Carlson, P.C. 3432 Jersey Ridge Road Davenport, IA 52807 Date(s) debt was incurred <u>5-25-17</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Scott County LACE127974</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$79,961.34
3.85	Nonpriority creditor's name and mailing address Culligan of Davenport 701 W. 76h St. Davenport, IA 52806 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Water provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$856.00
3.86	Nonpriority creditor's name and mailing address Dan's Overhead Doors 1810 Dan's Drive NW North Liberty, IA 52317 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Overhead door parts and repair</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$5,385.51
3.87	Nonpriority creditor's name and mailing address Davenport Electric Contract Co. Po Box 4229 Davenport, IA 52808 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$84,878.60
3.88	Nonpriority creditor's name and mailing address David J. Joseph Co. Brokerage Services Division PO Box 632960 Cincinnati, OH 45263-2960 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$0.00
3.89	Nonpriority creditor's name and mailing address Hal Davis 920 College Ave Davenport, IA 52803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,713.17

Debtor	Name	Case number (if known)
3.90	Sivyer Steel Corporation Dearboard Crane and Engineering Co 1133 E. Fifth St. Mishawaka, IN 46544 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Heavy equipment crane rental Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,132.00
3.91	Dell Financial Services Payment Processing Center PO Box 5292 Carol Stream, IL 60197-5292 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$347.59
3.92	Dell Financial Services L.L.C. PO Box 5292 Carol Stream, IL 60197-5292 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Judgment Travis County, TX, #D-1-GN-17-001151 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$85,502.98
3.93	Dell Marketing LP c/o Dell USA LP PO Box 802816 Chicago, IL 60680-2816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$3,507.20
3.94	Dietert Foundry Testing Equipment 9190 Roselawn Detroit, MI 48204 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,538.13
3.95	Dimensional Graphics 1320 West Kimberly Rd. Davenport, IA 52806 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,084.39
3.96	Direct Path fka Labrinth Healthcare 633 w. Wisconsin Ave Milwaukee, WI 53203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$6,336.28

Debtor	Name	Case number (if known)
3.97	Nonpriority creditor's name and mailing address Diversified Benefit Services, Inc. PO Box 260 Hartland, WI 53029 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$390.99
3.98	Nonpriority creditor's name and mailing address Diversified Nonferrous Tech Inc, PO Box 85 Trussville, AL 35173-0085 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$7,997.02
3.99	Nonpriority creditor's name and mailing address Dohrn Transfer Company PO Box 83138 Chicago, IL 60691-0138 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trucking and material storage</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$14,331.77
3.100	Nonpriority creditor's name and mailing address E91, Inc. PO Box 310055 Des Moines, IA 50331-0055 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$8,080.00
3.101	Nonpriority creditor's name and mailing address Eagle Engineering, Inc. PO Box 64 2701 S. 1st St. Eldridge, IA 52748 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$42,384.54
3.102	Nonpriority creditor's name and mailing address Earle M. Jorgensen Co. Quad Cities 75 Remittance Dr. Suite 6445 Chicago, IL 60675-6445 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.103	Nonpriority creditor's name and mailing address Eastern Iowa Tire 8528 Northwest Blvd Davenport, IA 52806 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$5,957.81

Debtor	Name	Case number (if known)
3.104	Nonpriority creditor's name and mailing address EasyPower, LLC 7730 SW Mohawk St. Tualatin, OR 97062 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$14,432.00
3.105	Nonpriority creditor's name and mailing address EDM ZAP Parts, Inc. 1108 Front St. Lisle, IL 60532-2258 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$900.00
3.106	Nonpriority creditor's name and mailing address Electronic Engineering 5000 Tremont Ave Suite 201 Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,689.87
3.107	Nonpriority creditor's name and mailing address Embroidme-Davenport 2222 E 53rd St. Suite 2 Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,111.29
3.108	Nonpriority creditor's name and mailing address EMC Insurance/IA c/o Piper Hughes, Esq. PO Box 2165 Cedar Rapids, IA 52406-2165 Date(s) debt was incurred <u>11-13-17</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Scott County LACE129072</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$20,625.26
3.109	Nonpriority creditor's name and mailing address Energetics 4901 Prairie Dock Drive Madison, WI 53718 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$621.72
3.110	Nonpriority creditor's name and mailing address Engles Trucking Services, Inc. PO Box 1090 Franklin, PA 16323 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trucking Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$17,380.00

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			
3.111	Nonpriority creditor's name and mailing address Enviromark 7301 Vine St. Ct. Davenport, IA 52806 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00
3.112	Nonpriority creditor's name and mailing address Eriez Manufacturing 2200 Asbury Rd. Erie, PA 16506 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,878.77
3.113	Nonpriority creditor's name and mailing address Exact Metrology Inc. PO Box 7536 Algonquin, IL 60102 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$105.00
3.114	Nonpriority creditor's name and mailing address Fastenal Company PO Box 978 Winona, MN 55987-0978 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,698.94
3.115	Nonpriority creditor's name and mailing address Fed Ex PO Box 94515 Palatine, IL 60094-4515 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Small Partial Shipping</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$775.86
3.116	Nonpriority creditor's name and mailing address Fed Ex Freight Dept CH PO Box 10306 Palatine, IL 60055-0306 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.83
3.117	Nonpriority creditor's name and mailing address Federal Insurance Company c/o McDonald, Woodward & Carlson, P.C. 3432 Jersey Ridge Road Davenport, IA 52807 Date(s) debt was incurred <u>8-4-17</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Scott County LACE128929</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$59,648.61

Debtor	Sivyer Steel Corporation Name	Case number (if known) _____
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3.118	Nonpriority creditor's name and mailing address Fermet Steel & Metal Works, Ltd. PO Box 076 Kiryat, Atta 28100 Israel Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$40,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.119	Nonpriority creditor's name and mailing address Ferrellgas, LP PO Box 173940 Denver, CO 80217-3940 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$975.06 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.120	Nonpriority creditor's name and mailing address First Insurance Funding 450 Skokie Blvd, Suite 1000 Northbrook, IL 60062-7917 Date(s) debt was incurred <u>9/29/17</u> Last 4 digits of account number <u>4361</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$902,028.01 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Financing for insurance coverage for property, cargo, freight, liability insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.121	Nonpriority creditor's name and mailing address Flash, Inc. PO Box 574 Green Lake, WI 54941 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$13,097.45 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Sand Truck provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.122	Nonpriority creditor's name and mailing address Flex-Pac, Inc. PO Box 623129 Indianapolis, IN 46262-3129 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,887.98 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping and Janitorial supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.123	Nonpriority creditor's name and mailing address Ford Photography 2008 15th St. A Moline, IL 61265 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$150.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.124	Nonpriority creditor's name and mailing address Foseco, Inc. 5645 Collections Center Dr Chicago, IL 60693 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$24,730.32 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Sivyer Steel Corporation	Case number (if known)	
Name			
3.125	Nonpriority creditor's name and mailing address Foundry Sand Service, LLC 5401 Victoria Dr. Suite 100 Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Chromite provider Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$142,367.00
3.126	Nonpriority creditor's name and mailing address G & K Services 7813 Solution Center Chicago, IL 60677-7008 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Uniforms and floor covering Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,097.07
3.127	Nonpriority creditor's name and mailing address G & W Patterns, Inc. 3875 S. Woelfel Rd New Berlin, WI 53146 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,050.00
3.128	Nonpriority creditor's name and mailing address Gardner Engineering Inc. 3825 Hickory Grove Road Davenport, IA 52806 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,210.11
3.129	Nonpriority creditor's name and mailing address General Electric Company 16201 Three Wide Drive E 206 Fort Worth, TX 76177 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$884,349.00
3.130	Nonpriority creditor's name and mailing address General Kinematics Corp PO Box 345 Crystal Lake, IL 60039-0345 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,180.23
3.131	Nonpriority creditor's name and mailing address General Pattern Corp 235 40th St. Moline, IL 61265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,230.00

Debtor	Sivyer Steel Corporation Name	Case number (if known) _____
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3.132	Nonpriority creditor's name and mailing address Gett Industries, Inc. c/o Steven E. Balk, Esq. 105 7th Street Silvis, IL 61282 Date(s) debt was incurred <u>7-11-17</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Rock Island County, IL, No. 15AR208</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,624.22
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3.133	Nonpriority creditor's name and mailing address Glass Service Center 4401 11th St. Macon, GA 31201 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$245.00
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3.134	Nonpriority creditor's name and mailing address Global Equipment Co., Inc. 29833 Netowrk Place Chicago, IL 60673-1298 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,632.66
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3.135	Nonpriority creditor's name and mailing address Godfrey & Kahn Bin #318 Milwaukee, WI 53288-0318 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$231,157.43
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3.136	Nonpriority creditor's name and mailing address Grainger Dept 802717033 Palatine, IL 60038-0001 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,289.69
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3.137	Nonpriority creditor's name and mailing address Graphic Products PO Box 4030 Beaverton, OR 97076-4030 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$209.99
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3.138	Nonpriority creditor's name and mailing address Guaranteed Pattern 1135 Pioneer B Trail Waukesha, WI 53186 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,000.00
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Debtor	Name	Case number (if known)
3.139	Nonpriority creditor's name and mailing address Gudgeon Thermfire International, Inc. 420 Neptune Cres London, Ontario N6M 1A1 CANADA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Reclaim system parts provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$7,569.50
3.140	Nonpriority creditor's name and mailing address Hach Co. 2207 Collections Center Dr. Chicago, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$252.38
3.141	Nonpriority creditor's name and mailing address Hagemeyer North America Inc. Po Box 404753 Atlanta, GA 30384-4753 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$3,942.96
3.142	Nonpriority creditor's name and mailing address Harbor Freight Tools USA Inc. PO Box 748076 Los Angeles, CA 90074-8076 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$272.04
3.143	Nonpriority creditor's name and mailing address Hastie Mining & Trucking Rt. 1 Box 55 Cave in Rock, IL 62919 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$16,590.00
3.144	Nonpriority creditor's name and mailing address Hempel Pipe & Supply Inc. 921 S. Rolff St. Davenport, IA 52802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,170.47
3.145	Nonpriority creditor's name and mailing address Henry County Clerk RE: 17-SC-17K 14th Judicial Circuit, Kewanee Division 401 East Third Street Kewanee, IL 61443 Date(s) debt was incurred <u>2-14-17</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>KD Industries of Illinois, Inc. v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			

3.146	Nonpriority creditor's name and mailing address Heraeus Electro-Nite Co. 88736 Expedite Way Chicago, IL 60695-1700 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,536.60
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3.147	Nonpriority creditor's name and mailing address Holland Inc. 27052 Network Place Chicago, IL 60673-1270 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trucking Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,364.49
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3.148	Nonpriority creditor's name and mailing address Holmes Murphy & Associates 3001 Westown Parkway West Des Moines, IA 50266 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$69,731.09
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3.149	Nonpriority creditor's name and mailing address Holming Fan & Fabrication 6900 N. Teutonia Ave Milwaukee, WI 53209 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,062.84
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3.150	Nonpriority creditor's name and mailing address Home Depot Credit Services Dept 32-2506568777 PO Box 9055 Des Moines, IA 50368-9055 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70.00
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3.151	Nonpriority creditor's name and mailing address Hometown Plumbing & Heating 13606 118th Ave Davenport, IA 52804 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$586.00
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3.152	Nonpriority creditor's name and mailing address Wesley B. Huisinga, Esq. Trustee for Henschen Manufacturing Co. Shuttleworth & Ingersoll, PLC PO Box 2017 Cedar Rapids, IA 52406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,114.00
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Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			
3.153	Nonpriority creditor's name and mailing address Hydraulic Solutions 216 40th St. Moline, IL 61265-1649 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,364.17</u>
3.154	Nonpriority creditor's name and mailing address IFM Efector Inc. PO Box 8538-307 Philadelphia, PA 19171-0307 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$336.00</u>
3.155	Nonpriority creditor's name and mailing address Insight Direct USA, Inc. 6820 S Harl Ave Tempe, AZ 85283 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$9,693.36</u>
3.156	Nonpriority creditor's name and mailing address Iowa American Water PO Box 94551 Palatine, IL 60094-4551 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,773.58</u>
3.157	Nonpriority creditor's name and mailing address Iowa Department of Natural Resources Wallace Building 4th Floor 502 E 9th St. Des Moines, IA 50319 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$8,000.00</u>
3.158	Nonpriority creditor's name and mailing address Iowa Fluid Power, Inc. PO Box 10107 Cedar Rapids, IA 52410-0107 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$765.26</u>
3.159	Nonpriority creditor's name and mailing address Iowa Illinois Termite & Pest Inc. 3909 Marquette St. Davenport, IA 52806 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rodent control</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$711.55</u>

Debtor	Sivyer Steel Corporation	Case number (if known)	
Name			
3.160	Nonpriority creditor's name and mailing address Iowa Machinery & Supply, Inc. PO Box 797 Des Moines, IA 50303 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Finishing supplies provider Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$69,616.54
3.161	Nonpriority creditor's name and mailing address Iowa-American Water 5201 Grand Ave Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Water utility company Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,279.25
3.162	Nonpriority creditor's name and mailing address J&L Consulting PO Box 270095 West Allis, WI 53227 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,672.68
3.163	Nonpriority creditor's name and mailing address Janda Motor Services, Inc. PO Box 10045 Cedar Rapids, IA 52410-0045 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,445.63
3.164	Nonpriority creditor's name and mailing address Jerico Tool Company 721 E 59th St. Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,021.00
3.165	Nonpriority creditor's name and mailing address JP Morgan Chase PO Box 4475 Carol Stream, IL 60197-4475 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$447,690.02
3.166	Nonpriority creditor's name and mailing address K & K True Value Hardware 1818 Grant St. Bettendorf, IA 52722 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,219.59

Debtor	Name	Case number (if known)
	Sivyer Steel Corporation	
3.167	Nonpriority creditor's name and mailing address K & M Machine Fabricating Inc. PO Box 218 20745 M-60 East Cassopolis, MI 49031-0218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,450.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.168	Nonpriority creditor's name and mailing address Karden Sales & Consulting, Inc. 9114 Virginia Rd. Unit 100 Lake in the Hills, IL 60156 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,897.45 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.169	Nonpriority creditor's name and mailing address KD Industries of Illinois, Inc. c/o Barash & Everett, LLC 211 West Second Street Kewanee, IL 61443 Date(s) debt was incurred <u>2-14-17</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,880.38 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Henry County, IL, 14th Judicial Circuit Court,</u> <u>Kewanee Division</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.170	Nonpriority creditor's name and mailing address Konecranes, Inc. PO Box 641807 Pittsburgh, PA 15264-1807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,121.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.171	Nonpriority creditor's name and mailing address KRC Enterprises, LLC dba Guardian Medical Logistics PO Box 790379 Saint Louis, MO 63179 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$925.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.172	Nonpriority creditor's name and mailing address Kymbyl Komplete Kare, Inc. 1411 W. 5th St. Coal Valley, IL 61240 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,595.20 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.173	Nonpriority creditor's name and mailing address L&M Accounts Inc. (for Northwest Mechanical, Inc.) c/o Dergo Law, P.L.L.C. 2200 52nd Avenue Moline, IL 61265 Date(s) debt was incurred <u>7-19-17</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,938.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Scott County SCSC210031</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			

3.174	Nonpriority creditor's name and mailing address Lanco Slings & Rigging, Inc. 4960 41st St. Court Moline, IL 61265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,764.52
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3.175	Nonpriority creditor's name and mailing address Lane & Waterman 220 North Main St. Suite 600 Davenport, IA 52801-1987 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorney fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,380.00
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3.176	Nonpriority creditor's name and mailing address Lanzen, Inc. 30980 Groesbeck Highway Roseville, MI 48066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Machine Shop</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,542.00
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3.177	Nonpriority creditor's name and mailing address Liebovich Steel & Aluminum Co. PO Box 1779 Cedar Rapids, IA 52406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,556.50
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3.178	Nonpriority creditor's name and mailing address Linco Refractory Supply Inc. PO Box 515 Coal Valley, IL 61240-0515 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Heat Treat repairs and Melt Rods provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39,680.00
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3.179	Nonpriority creditor's name and mailing address Lindfield Corporate Services Ltd. 20th Floor, Suite 206 340 Queen's Road Central Hong Kong CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>business registration services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,950.00
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3.180	Nonpriority creditor's name and mailing address Linwood Mining & Minerals Corp 5401 Victoria Ave Suite 100 Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lime provider, removes used sand,</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,959.78
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Debtor	Sivyer Steel Corporation Name _____	Case number (if known) _____
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3.181	Nonpriority creditor's name and mailing address Lloyd's Register Quality Assurance PO Box 301030 Dallas, TX 75303-1030 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,587.81
<hr/>			
3.182	Nonpriority creditor's name and mailing address Logan Contractors Supply Inc. PO Box 5283 Des Moines, IA 50305 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,721.25
<hr/>			
3.183	Nonpriority creditor's name and mailing address Macawber Engineering, Inc. 1829 Clydesdale St. Maryville, TN 37801-3796 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Maintenance Materials Provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,876.32
<hr/>			
3.184	Nonpriority creditor's name and mailing address Machine Tooling Technology 420 Harvester Ct. Wheeling, IL 60090 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$918.52
<hr/>			
3.185	Nonpriority creditor's name and mailing address Magma Foundry Technologies 10 North Martingale Rd. Suite 425 Schaumburg, IL 60173 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,718.70
<hr/>			
3.186	Nonpriority creditor's name and mailing address MailFinance Dept 3682 PO Box 123682 Dallas, TX 75312-3682 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$948.04
<hr/>			
3.187	Nonpriority creditor's name and mailing address Malespin Cleaning Services 2701 Clines Ford Dr. Belvidere, IL 61008 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,420.00

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			

3.188	Nonpriority creditor's name and mailing address Manley Brothers of Indiana, Inc. PO Box 80 300 S. Vermillion st. Troy Grove, IL 61372-0080 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Silica provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$101,696.68
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3.189	Nonpriority creditor's name and mailing address Marco, Inc. NW 7128, PO Box 1450 Minneapolis, MN 55485-7028 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,263.68
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3.190	Nonpriority creditor's name and mailing address Materials & Equipment Inc. c/o Norm Boelk 5840 Jenny Lane Bettendorf, IA 52722 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,372.65
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3.191	Nonpriority creditor's name and mailing address Max's Cab Company 3112 Chateau Knoll Bettendorf, IA 52722 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,258.25
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3.192	Nonpriority creditor's name and mailing address McGuire Sponsel 201 N. Illinois St., Suite 1000 Indianapolis, IN 46204 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,896.89
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3.193	Nonpriority creditor's name and mailing address McMaster Carr Supply Co. PO Box 7690 Chicago, IL 60680-7690 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,917.54
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3.194	Nonpriority creditor's name and mailing address Mediacom PO Box 5744 Carol Stream, IL 60197-5744 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$700.80
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Debtor	Name	Case number (if known)
3.195	Sivyer Steel Corporation Pedro Mejia c/o Robert T. Rosenstiel, Esq. PO Box 4298 Rock Island, IL 61204-4298 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Personal injury claim Scott County LACE128299 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.196	Metal Surgery Milwaukee Ltd. PO Box 370515 Milwaukee, WI 53237-0515 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$6,160.00 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.197	Metamora Industries N8514JO 503 N. Niles St. Metamora, IL 61548-0739 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$26,636.63 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.198	Metcast Service Tech Resources Inc. Blast Cleaning Technologies 16211 W. Lincoln Ave New Berlin, WI 53151 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$929.50 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Maintenance parts provider Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.199	Metlife Industries 141 Mong Way PO Box 53 Reno, PA 16343 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$392.00 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.200	Metro Tools & Abrasives PO Box 788 Cedar Rapids, IA 52406-0788 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$1,258.64 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.201	Mid States Heating Services Inc. 3900 2nd Ave Moline, IL 61265 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$7,473.95 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Sivyer Steel Corporation Name	Case number (if known) _____
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3.202	Nonpriority creditor's name and mailing address Mid States Specialty Sales c/o David A. Hunt 5440 1st Ave Moline, IL 61265 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,176.81
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3.203	Nonpriority creditor's name and mailing address MidAmerican Energy PO Box 8020 Davenport, IA 52808-8020 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$91,683.60
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3.204	Nonpriority creditor's name and mailing address MidAmerican Energy Services, LLC PO Box 8019 Davenport, IA 52808-8019 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$319,297.40
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3.205	Nonpriority creditor's name and mailing address Midstate Manufacturing Co 750 West Third St. Galesburg, IL 61401 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Machine shop</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41,262.20
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3.206	Nonpriority creditor's name and mailing address Midwest Air Compressor LLC PO Box 536 Waupaca, WI 54981 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$535.00
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3.207	Nonpriority creditor's name and mailing address Midwest Filtration LLC 9775 International Blvd Cincinnati, OH 45246 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$785.36
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3.208	Nonpriority creditor's name and mailing address Midwest Therapy Centers PO Box 3488 Davenport, IA 52808-3488 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$275.00
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Debtor	Sivyer Steel Corporation Name _____	Case number (if known) _____
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3.209	Nonpriority creditor's name and mailing address Milwaukee Habitat for Humanity Attn: Melissa Herguth 3726 N. Booth St. Milwaukee, WI 53212 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.210	Nonpriority creditor's name and mailing address Mississippi Laser Inc. 7700 47th St. Milan, IL 61264 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,466.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.211	Nonpriority creditor's name and mailing address Mitts & Merrill LP 28623 Lake Industrial Blvd Tavares, FL 32778 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,213.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.212	Nonpriority creditor's name and mailing address Modular Space Corporation 12603 Collections Center Dr. Chicago, IL 60693-0126 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,469.16 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.213	Nonpriority creditor's name and mailing address Tim Mohs 1582 Berryfield Ct. Bettendorf, IA 52722 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$324.71 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.214	Nonpriority creditor's name and mailing address Morton Machining LLC 701 Flint Ave Morton, IL 61550 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$600.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.215	Nonpriority creditor's name and mailing address Motion Industries, Inc. c/o Blitt and Gaines, P.C. 2536 73rd Street Urbandale, IA 50322 Date(s) debt was incurred <u>6-27-17</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$17,025.61 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Scott County LACE128935</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Name	Case number (if known)
3.216	Nonpriority creditor's name and mailing address MRS - The Management Association N19 W24400 Riverwood Dr Waukesha, WI 53188 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$125.00
3.217	Nonpriority creditor's name and mailing address MSC Industrial Supply Co. Dept CH 0075 Palatine, IL 60055-0075 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,764.06
3.218	Nonpriority creditor's name and mailing address N & M Transfer Co., Inc. c/o Bertroche Law Office PO Box 155 Cedar Rapids, IA 52406-0155 Date(s) debt was incurred <u>7-11-07</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Scott County LACE128914</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$34,308.26
3.219	Nonpriority creditor's name and mailing address N&M Expedited 630 Muttart Rd. Neenah, WI 54956-9752 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$32,544.73
3.220	Nonpriority creditor's name and mailing address N&M Transfer Co. Inc. 630 Muttart Rd Neenah, WI 54956-9752 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,059.07
3.221	Nonpriority creditor's name and mailing address Natural Resource Technology 234 W. Florida St., Fifth Floor Milwaukee, WI 53204 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$7,091.90
3.222	Nonpriority creditor's name and mailing address New Pig Corporation One Pork Avenue Tipton, PA 16684 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$312.00

Debtor	Name	Case number (if known)
3.223	Sivyer Steel Corporation Ningbo Daming Precision Casting Co. Ltd. Hehua Bridge Yunlong Town Ningbo 315135 CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	\$148,787.36 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.224	Ningbo Qianhao Metal Product Co. 2086 Ningheng Sounth Rd. Hengxi Town 315131 CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	\$9,070.56 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.225	Ningbo Yong Chao Mould Co. Ltd Baqiao Region Jiangkou St. Zhejiang Province 315504 CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	\$15,200.00 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.226	Nite Ize 5660 Central Ave Boulder, CO 80301 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$16.09 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.227	Northwest Mechanical, Inc. 5885 Tremont Ave Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$4,938.48 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.228	Nott Company NW-7779 PO Box 1450 Minneapolis, MN 55485-7779 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$0.00 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.229	NSL Central Testing LLC 4535 Renaissance Pkwy Cleveland, OH 44125 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$6,066.69 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			
3.230	Nonpriority creditor's name and mailing address O'Connell Machinery Co. Inc. 175 Great Arrow Ave Buffalo, NY 14207 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,251.41
3.231	Nonpriority creditor's name and mailing address O'Connell Machinery Co., Inc. c/o Piper Hughes, Esq. PO Box 2165 Cedar Rapids, IA 52406 Date(s) debt was incurred <u>5-24-17</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> <u>Scott County SCSC210194</u> <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.232	Nonpriority creditor's name and mailing address Oerlikon Fairfield Drive System Inc. PO Box 7940 US 52 South Lafayette, IN 47903 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,100.00
3.233	Nonpriority creditor's name and mailing address Oertel Sheet Metal 9104 Zenith Ave Davenport, IA 52806 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$87,440.00
3.234	Nonpriority creditor's name and mailing address Olderog Tire Service Inc. 2316 Rockingham Rd. Davenport, IA 52802 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,848.54
3.235	Nonpriority creditor's name and mailing address Omega Engineering Inc. PO Box 405369 Atlanta, GA 30384-5369 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,293.62
3.236	Nonpriority creditor's name and mailing address Overhead Door Co. of Peoria 2376 Washington Rd. Washington, IL 61571 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,750.00

Debtor	Sivyer Steel Corporation Name	Case number (if known) _____
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3.237	Nonpriority creditor's name and mailing address Palmer Manufacturing & Supply Inc. PO Box 2579 Springfield, OH 45501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,974.99
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3.238	Nonpriority creditor's name and mailing address Parts Engineering Co. LLC PO Box 300048 Duluth, GA 30096-0300 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,005.47
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3.239	Nonpriority creditor's name and mailing address PC Connection 730 Milford Rd. Merrimack, NH 03054-4631 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,218.51
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3.240	Nonpriority creditor's name and mailing address Peerless Energy Systems LLC 4601 South 76th Circle Omaha, NE 68127 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,308.98
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3.241	Nonpriority creditor's name and mailing address Pension Benefit Guaranty Corp. Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.242	Nonpriority creditor's name and mailing address Per Mar Security PO Box 1101 Davenport, IA 52805 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,437.41
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3.243	Nonpriority creditor's name and mailing address Petersen Plumbing & Heating 926 W. 3rd St. Davenport, IA 52802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$950.72
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Debtor	Sivyer Steel Corporation <small>Name</small>		Case number (if known)
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3.244	Nonpriority creditor's name and mailing address PGI PO Box 404351 Atlanta, GA 30384-4351 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$76.25
<hr/>			
3.245	Nonpriority creditor's name and mailing address Pier Foundry & Pattern Shop 51 State St. Saint Paul, MN 55107 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,619.52
<hr/>			
3.246	Nonpriority creditor's name and mailing address Plant Equipment Co. Inc. PO box 3157 Rock Island, IL 61204-3157 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Everything supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49,547.48
<hr/>			
3.247	Nonpriority creditor's name and mailing address Postal Source 21130 Holden Dr. Davenport, IA 52804 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.29
<hr/>			
3.248	Nonpriority creditor's name and mailing address PRI Inc. 161 Thorn Hill Rd. Warrendale, PA 15086 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,475.00
<hr/>			
3.249	Nonpriority creditor's name and mailing address PRIAC Prudential Investment Mgmt Svcs 280 Trumbull St. H08 Hartford, CT 06103 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,075.50
<hr/>			
3.250	Nonpriority creditor's name and mailing address Pride Machine & Tool, Inc. 1821 North 30th Ave Melrose Park, IL 60160 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,950.00

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			

3.251	Nonpriority creditor's name and mailing address Prince Minerals, Inc. PO Box 71442 Chicago, IL 60694-1442 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49,280.00
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3.252	Nonpriority creditor's name and mailing address QC Analytical Services LLC 1798 Iowa Drive Le Claire, IA 52753 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,252.19
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3.253	Nonpriority creditor's name and mailing address QC Transport, Inc. PO Box 83 Bettendorf, IA 52722 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$970.30
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3.254	Nonpriority creditor's name and mailing address Quad Cities Chamber of Commerce 622 19th St. Moline, IL 61265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,300.00
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3.255	Nonpriority creditor's name and mailing address Quad City Occupational Health PO Box 3488 Davenport, IA 52808-3488 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,553.00
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3.256	Nonpriority creditor's name and mailing address Quad City Safety Inc. PO Box 1720 Davenport, IA 52809-1720 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,697.37
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3.257	Nonpriority creditor's name and mailing address Quad City Testing Lab Inc. 21112 Scott Park Rd. Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,474.02
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Debtor	Sivyer Steel Corporation Name	Case number (if known)
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3.258	Nonpriority creditor's name and mailing address Quant Corporation 400 Travis lane Unit 28 Waukesha, WI 53189 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,966.20
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3.259	Nonpriority creditor's name and mailing address Quincy Compressor LLC Department 3427, Lockbox 893427 PO Box 123427 Dallas, TX 75312-3427 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,333.57
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3.260	Nonpriority creditor's name and mailing address R&L Carriers PO Box 10020 Port William, OH 45164 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,216.45
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3.261	Nonpriority creditor's name and mailing address R-Con NDT INV 5605 Freitag Dr. Menomonie, WI 54751 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>X-ray and Mag material provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,877.78
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3.262	Nonpriority creditor's name and mailing address Raynor Door Inc of the Quad Cities 2370 Westlake Blvd Davenport, IA 52804 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,386.49
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3.263	Nonpriority creditor's name and mailing address Recycling Solutions & Consultants PO Box 468 Wood River, IL 62095 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,410.01
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3.264	Nonpriority creditor's name and mailing address Red Wing Shoe Store 3014 E 53rd St. Davenport, IA 52807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,202.09
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Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			

3.265	Nonpriority creditor's name and mailing address Red Wing Shoe Store 3301 Avenue of the Cities Moline, IL 61265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$928.72
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3.266	Nonpriority creditor's name and mailing address Redridge Lender Services LLC PO Box 776068 Chicago, IL 60677-6068 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,015.86
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3.267	Nonpriority creditor's name and mailing address Refractory & Insulation Supply, Inc. PO Box 391 Bettendorf, IA 52722-0007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Melt supplies provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54,756.25
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3.268	Nonpriority creditor's name and mailing address Regalia Manufacturing Co. PO Box 4448 Rock Island, IL 61204-4448 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$650.00
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3.269	Nonpriority creditor's name and mailing address Republic Companies PO Box 3807 Davenport, IA 52808 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,254.67
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3.270	Nonpriority creditor's name and mailing address Republic Services PO Box 9001154 Louisville, KY 40290-1154 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Electronics provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,994.19
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3.271	Nonpriority creditor's name and mailing address Rexco Equipment dba Bobcat of Quad Cities 1925 Blairs Ferry Rd NE Cedar Rapids, IA 52402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$167.51
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Debtor	Sivyer Steel Corporation <small>Name</small>		Case number (if known)
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3.272	Nonpriority creditor's name and mailing address Richardson Manufacturing Co. 2209 Old Jacksonville Rd. Springfield, IL 62704 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Machine Shop</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$227,925.50
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3.273	Nonpriority creditor's name and mailing address Rilco Fluid Care, Inc. 1320 1st St. Rock Island, IL 61201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,278.28
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3.274	Nonpriority creditor's name and mailing address RIM Logistics Ltd Deptment 4026 PO Box 4653 Hinsdale, IL 60522-4653 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$109,840.07
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3.275	Nonpriority creditor's name and mailing address River Valley Cooperative PO Box 256 Eldridge, IA 52748 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,843.02
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3.276	Nonpriority creditor's name and mailing address RK Dixon PO Box 856699 Minneapolis, MN 55485-6699 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$608.77
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3.277	Nonpriority creditor's name and mailing address Road Machinery & Supplies SDS 12-0749 PO Box 86 Minneapolis, MN 55486-0749 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,012.54
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3.278	Nonpriority creditor's name and mailing address Robert Half Finance & Accounting PO Box 743295 Los Angeles, CA 90074-3295 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,050.00
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Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			

3.279	Nonpriority creditor's name and mailing address Rock Island County Clerk RE: No. 15AR208 14th Judicial Circuit Court 210 15th Street Rock Island, IL 61201 Date(s) debt was incurred <u>7-11-17</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>Gett Industries, Inc. v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.280	Nonpriority creditor's name and mailing address Rock Island Electric Motor Inc. PO Box 6190 Rock Island, IL 61204-6190 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,059.59
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3.281	Nonpriority creditor's name and mailing address Rock Island Lubricants and Chemical, Inc PO Box 5015 Rock Island, IL 61204-5015 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lubricants and disposal provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,606.94
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3.282	Nonpriority creditor's name and mailing address Rockford Rigging 5401 Main Sail Roscoe, IL 61073 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,014.04
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3.283	Nonpriority creditor's name and mailing address Roemer Machine & Welding Co. 3053 Research Pkwy Davenport, IA 52806 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$360.00
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3.284	Nonpriority creditor's name and mailing address Rogan, Inc. PO Box 908 Bettendorf, IA 52722 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,510.10
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3.285	Nonpriority creditor's name and mailing address Russell Companies 1435 Brown St. Bettendorf, IA 52722 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$265.08
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Debtor	Sivyer Steel Corporation Name	Case number (if known) _____
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3.286	Nonpriority creditor's name and mailing address Ryan & Assoc. Inc. 10955 160th St. Davenport, IA 52804 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,603.85
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3.287	Nonpriority creditor's name and mailing address Ryder Transportation Services PO Box 96723 Chicago, IL 60693-6723 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rental Truck</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,398.64
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3.288	Nonpriority creditor's name and mailing address Sadler Machine Co. 4150 Thomas Dr. SW PO Box 1716 Cedar Rapids, IA 52406-1716 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,270.00
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3.289	Nonpriority creditor's name and mailing address Safety Kleen Corp PO Box 650509 Dallas, TX 75265-0509 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17.01
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3.290	Nonpriority creditor's name and mailing address Schebler Company PO Box 310181 Des Moines, IA 50331-0181 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,927.85
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3.291	Nonpriority creditor's name and mailing address Schiff Hardin LLP 300 Crescent Court Suite 400 Dallas, TX 75201 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,448.47
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3.292	Nonpriority creditor's name and mailing address Schwenker & Mouglin, Inc. 1614 5th Ave Moline, IL 61265 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,927.30
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Debtor	Name	Case number (if known)
3.293	Nonpriority creditor's name and mailing address Scott County Clerk RE: LACE129351 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred <u>10-25-17</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>Aerotek, Inc. v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.294	Nonpriority creditor's name and mailing address Scott County Clerk RE: LACE128218 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred <u>12-27-16</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>Crescent Electric Supply Company v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.295	Nonpriority creditor's name and mailing address Scott County Clerk RE: LACE129072 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred <u>11-13-17</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>EMC Insurance/IA v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.296	Nonpriority creditor's name and mailing address Scott County Clerk RE: LACE128929 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred <u>8-4-17</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>Federal Insurance Company v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.297	Nonpriority creditor's name and mailing address Scott County Clerk RE: LACE127974 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred <u>5-25-17</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>CT Products, LLC v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.298	Nonpriority creditor's name and mailing address Scott County Clerk RE: LACE128935 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred <u>6-27-17</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>Motion Industries, Inc. v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	Name	Case number (if known)
3.299	Nonpriority creditor's name and mailing address Scott County Clerk RE: LACE128914 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred <u>7-11-17</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>N & M Transfer Co., Inc. v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.300	Nonpriority creditor's name and mailing address Scott County Clerk RE: LACE128765 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred <u>11-21-17</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>Shenyang Jinli Metals & Minerals Imp & Exp Co., Ltd. v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.301	Nonpriority creditor's name and mailing address Scott County Clerk RE: LACE128299 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>Pedro Mejia v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.302	Nonpriority creditor's name and mailing address Scott County Small Claims Clerk RE: SCSC210031 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred <u>7-19-17</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>L& M Accounts Inc. v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.303	Nonpriority creditor's name and mailing address Scott County Small Claims Clerk RE: SCSC210194 Scott County Courthouse 400 West 4th Street Davenport, IA 52801-1034 Date(s) debt was incurred <u>5-24-17</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>O'Connell Machinery Co., Inc. v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.304	Nonpriority creditor's name and mailing address Sedona Technologies Inc. 600 35th Ave Moline, IL 61265 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$49,577.25
3.305	Nonpriority creditor's name and mailing address Seither & Cherry Quad Cities, Inc. 611 E 59th St. Davenport, IA 52807 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$37,500.00

Debtor	Sivyer Steel Corporation	Case number (if known)	
Name			

3.306	Nonpriority creditor's name and mailing address Selective Insurance Lockbox 2747 PO Box 8500 Philadelphia, PA 19178-2747 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Flood Insurance Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,860.00
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3.307	Nonpriority creditor's name and mailing address Shanghai Soonv Special Alloy Co. Ltd No. 35 Xiangxin Rd Qingpu District, Shanghai CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$195.34
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3.308	Nonpriority creditor's name and mailing address Shannahan Crane & Hoist, Inc. PO Box 790379 Saint Louis, MO 63179-0379 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,766.93
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3.309	Nonpriority creditor's name and mailing address Shenyang Jinli Metals & Minerals Imp & Exp Co., Ltd. c/o Jonathan M. Causey, Esq. 505 5th Avenue, Ste. 535 Des Moines, IA 50309 Date(s) debt was incurred <u>11-21-17</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Judgment Scott County LACE128765 Notice Only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.310	Nonpriority creditor's name and mailing address Shenyang Jinli Metals & Minerals Import & Export Co. Ltd Room 15-4 No. 22 Shenyang 110014 CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$465,895.22
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3.311	Nonpriority creditor's name and mailing address Sherwin Williams 3548 State St. Bettendorf, IA 52722-6435 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,063.63
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3.312	Nonpriority creditor's name and mailing address Siemens Product Lifecycle Mgmt Software PO Box 2168 Carol Stream, IL 60132-2168 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48,100.00
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Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			
3.313	Nonpriority creditor's name and mailing address Simmers Crane Design & Service 1134 Salem Parkway Salem, OH 44460 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,053.07
3.314	Nonpriority creditor's name and mailing address Smith S J Welding Supply 3707 W. River Dr. Davenport, IA 52802 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Gas cylinder, weld consumables, and safety provider Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$161,711.99
3.315	Nonpriority creditor's name and mailing address Special Olympics Iowa PO Box 71664 Clive, IA 50325-0664 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30.78
3.316	Nonpriority creditor's name and mailing address Speyside Machining Holdings, LLC 24 Frank Lloyd Wright Dr. Suite H3225 Ann Arbor, MI 48106 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,038.35
3.317	Nonpriority creditor's name and mailing address Standard Forwarding Co. Inc. 62820 Collection Center Dr. Chicago, IL 60693-0628 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$576.17
3.318	Nonpriority creditor's name and mailing address State Chemical Solutions PO Box 74189 Cleveland, OH 44197-0268 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,510.50
3.319	Nonpriority creditor's name and mailing address Steel Founders' Society of America 780 Mcardle Dr. Unit G Crystal Lake, IL 60014 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,541.80

Debtor Sivyer Steel Corporation		Case number (if known) _____
Name _____		
3.320	Nonpriority creditor's name and mailing address Steel Wind Industries, Inc. 7550 S. 10th St. Oak Creek, WI 53154 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,850.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Machine Shop</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.321	Nonpriority creditor's name and mailing address Straight Shot Express PO Box 2190 Davenport, IA 52809-2190 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$87.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.322	Nonpriority creditor's name and mailing address Strategy in Progress, LLC PO Box 1303 Bettendorf, IA 52722 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$900.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.323	Nonpriority creditor's name and mailing address Suncoast Packaging Inc. 4125 Pipestone Rd. PO Box 120 Sodus, MI 49126 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,120.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.324	Nonpriority creditor's name and mailing address Syntron Material Handling, LLC PO Box 96138 Chicago, IL 60693 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,608.09 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Maintenance parts provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.325	Nonpriority creditor's name and mailing address TAG Communications, Inc. 230 E. Second St. Davenport, IA 52801 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$31,689.12 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.326	Nonpriority creditor's name and mailing address Tall Grass Business Resources, Inc. 218 2nd St. Coralville, IA 52241 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$272.81 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sivyer Steel Corporation		Case number (if known) _____	
Name _____			

3.327	Nonpriority creditor's name and mailing address TCCI Mfg. 2120 North 22nd St. Decatur, IL 62526 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,221.42
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3.328	Nonpriority creditor's name and mailing address Team Industrial Services Inc. PO Box 842233 Dallas, TX 75284-2233 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,652.76
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3.329	Nonpriority creditor's name and mailing address Teledyne ISCO Inc. Dept 1175 PO Box 121175 Dallas, TX 75312-1175 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$283.55
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3.330	Nonpriority creditor's name and mailing address Thunder Bay Pattern Works 44345 Macomb Industrial Dr. Clinton Township, MI 48036 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,466.00
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3.331	Nonpriority creditor's name and mailing address Timberline Pallet & Skid, Inc. PO Box 631 East Moline, IL 61244 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping material provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,520.40
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3.332	Nonpriority creditor's name and mailing address Tinker Omega Manufacturing PO Box 328 2424 Columbus Ave Springfield, OH 45503 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,800.47
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3.333	Nonpriority creditor's name and mailing address Titan Machinery Inc. 3136 76th St. West Davenport, IA 52806 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Sivyer Steel Corporation <small>Name</small>		Case number (if known)
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3.334	Nonpriority creditor's name and mailing address Tool House, Inc. 5205 South Emmer Dr. New Berlin, WI 53151-1194 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Finishing Air Tools parts and sales</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,136.00
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3.335	Nonpriority creditor's name and mailing address Toolcraft Co. Inc. W194 N11092 Kleinmann Dr. Germantown, WI 53022 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,955.76
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3.336	Nonpriority creditor's name and mailing address Total Quality Logistics PO Box 634558 Cincinnati, OH 45263-4558 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,284.24
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3.337	Nonpriority creditor's name and mailing address Travis County Clerk RE: D-1-GN-17-001151 Travis County 98th District Court PO Box 1748 Austin, TX 78767 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Court costs</u> <u>Dell Financial Services L.L.C. v. debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.338	Nonpriority creditor's name and mailing address Tri Aerospace LLC 1055 South Hunt St. Terre Haute, IN 47803 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,015.00
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3.339	Nonpriority creditor's name and mailing address Tri State Fire Control, Inc. 2316 4th Ave Moline, IL 61265 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,784.22
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3.340	Nonpriority creditor's name and mailing address Tri-City Electric Co. 6225 N Brady St. Davenport, IA 52806-0002 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,669.20
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Debtor	Name	Case number (if known)
3.341	Nonpriority creditor's name and mailing address Trimborn Tooling Design LLC W235 S6720 Salem Court Waukesha, WI 53189-9379 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$10,309.00
3.342	Nonpriority creditor's name and mailing address Trinity Consultants 12770 Merit Dr. Suite 900 Dallas, TX 75251 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$6,775.66
3.343	Nonpriority creditor's name and mailing address Tuf-Lok International PO Box 5078 Madison, WI 53705 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$597.37
3.344	Nonpriority creditor's name and mailing address Tully Industrial Inc. PO Box 249 Davenport, IA 52805 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,126.00
3.345	Nonpriority creditor's name and mailing address Tungsten Network Inc. PO Box 535146 Atlanta, GA 30338 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,420.00
3.346	Nonpriority creditor's name and mailing address U.S. Energy Services, Inc. 32604 Collection Center Dr. Chicago, IL 60693-0604 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$20,757.00
3.347	Nonpriority creditor's name and mailing address UI Labs Attn: DMDII Finance 1415 N. Cherry Ave. Chicago, IL 60642 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$500.00

Debtor	Sivyer Steel Corporation Name	Case number (if known) _____
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3.348	Nonpriority creditor's name and mailing address United Auto Workers 4589 NW 6th Dr. Des Moines, IA 50313 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Union Retirement Income Plan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.349	Nonpriority creditor's name and mailing address United Steel Workers of America PO Box 98517 Chicago, IL 60693 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Steel Union</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,302.79
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3.350	Nonpriority creditor's name and mailing address Universal Welding and Engineering 1709 Pearl St. Waukesha, WI 53186 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49,056.00
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3.351	Nonpriority creditor's name and mailing address UPS Freight 28013 Network Place Chicago, IL 60673-1280 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$154.25
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3.352	Nonpriority creditor's name and mailing address Van Hydraulics, Inc. 25 Gooding St. Conklin, MI 49403 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,870.97
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3.353	Nonpriority creditor's name and mailing address Van Meter Industrial LLC 850 32nd Ave SW Cedar Rapids, IA 52404 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,373.11
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3.354	Nonpriority creditor's name and mailing address Venture Measurement 150 Venture Blvd. Spartanburg, SC 29306 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Name	Case number (if known)
3.355	Nonpriority creditor's name and mailing address Verizon Wireless PO Box 25505 Lehigh Valley, PA 18002-5505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,177.07
3.356	Nonpriority creditor's name and mailing address VWR Scientific LLC PO Box 640169 Pittsburgh, PA 15264-0169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$889.46
3.357	Nonpriority creditor's name and mailing address Walker National, Inc. 60C Solferino St. Worcester, MA 01604 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$5,539.50
3.358	Nonpriority creditor's name and mailing address Walmart Stores, Inc. c/o Bank of America PO Box 60982 Saint Louis, MO 63160-0982 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$8,868.68
3.359	Nonpriority creditor's name and mailing address Waltz-Holst Blow Pipe co. Inc. 230 Alta Dale SE Ada, MI 49301-9113 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$70,470.35
3.360	Nonpriority creditor's name and mailing address Dale Weeldreyer 5828 Crestwood Dr. Fort Collins, CO 80528 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,904.48
3.361	Nonpriority creditor's name and mailing address Wells Fargo Bank, N.A. 300 Tri-State International Pkwy Suite 400 Lincolnshire, IL 60069 Date(s) debt was incurred <u>12-1-14</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>returned printers</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$10,787.86

Debtor	Sivyer Steel Corporation Name _____	Case number (if known) _____
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3.362	Nonpriority creditor's name and mailing address Wells Fargo Vendor Fin Services PO Box 105710 Atlanta, GA 30348-5710 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,493.19
<hr/>			
3.363	Nonpriority creditor's name and mailing address Wheelabrator Group PO Box 73987 Chicago, IL 60673 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,524.76
<hr/>			
3.364	Nonpriority creditor's name and mailing address Whirl Air Flow Corporation 20055 177th St. Big Lake, MN 55309 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,135.00
<hr/>			
3.365	Nonpriority creditor's name and mailing address Wynn Environmental 211 Camars Dr. Warminster, PA 18974 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Maintenance supplies provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,010.00
<hr/>			
3.366	Nonpriority creditor's name and mailing address YMH Torrance Inc. PO Box 460 Hiawatha, IA 52233-0460 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,542.29
<hr/>			
3.367	Nonpriority creditor's name and mailing address Zenar Corporation PO Box 107 7301 S 6th St. Oak Creek, WI 53154-0107 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,305.00
<hr/>			
3.368	Nonpriority creditor's name and mailing address Zhejiang Wujing Machine Mfg Co. Ltd. No 108 Qingnian Rd. Wuyi County, Zhejiang Province CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,729.64

Debtor **Sivyer Steel Corporation**
Name

Case number (if known)

3.369 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is: *Check all that apply.***\$9,885.34****Zhengzhou Hi-Tech Mechanical Industry Co**
18 Yulan St.
Zhengzhou H. Zhengzhou
Henan Province 450001
CHINA

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Date(s) debt was incurred _

Basis for the claim: _

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	ADP Commercial Leasing 3726 Solutions Center Chicago, IL 60677-3007	Line <u>3.6</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	Ask Chemicals PO Box 360615 Pittsburgh, PA 15251-6615	Line <u>3.31</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	Crescent Electric Supply PO Box 500 East Dubuque, IL 61025-4420	Line <u>3.81</u> <input type="checkbox"/> Not listed. Explain _____	—
4.4	CT Products, LLC PO Box 4810 Davenport, IA 52808-4810	Line <u>3.84</u> <input type="checkbox"/> Not listed. Explain _____	—
4.5	EMC Insurance Companies Abby Freerksen - Accounting 717 Mulberry St. Des Moines, IA 50309	Line <u>3.108</u> <input type="checkbox"/> Not listed. Explain _____	—
4.6	Gett Industries, Ltd. 7307 50th Milan, IL 61264	Line <u>3.132</u> <input type="checkbox"/> Not listed. Explain _____	—
4.7	KD Industries of Illinois, Inc. 1134 W. South St. Kewanee, IL 61443	Line <u>3.169</u> <input type="checkbox"/> Not listed. Explain _____	—
4.8	Linfield Corporate Services, Ltd. 901B, Kinwick Centre 32 Hollywood Rd. Central Hong Kong CHINA	Line <u>3.179</u> <input type="checkbox"/> Not listed. Explain _____	—
4.9	Motion Industries PO Box 98412 Chicago, IL 60693	Line <u>3.215</u> <input type="checkbox"/> Not listed. Explain _____	—

Debtor	Sivyer Steel Corporation	Case number (if known)	
	Name		
	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.10	Sadler Machine Co. c/o Terry L. Gibson 2501 Grand Ave Suite B Des Moines, IA 50312	Line 3.288 <input type="checkbox"/> Not listed. Explain _____	—
4.11	Speyside Machining Holdings, LLC c/o Terry L. Gibson 2501 Grand Ave Suite B Des Moines, IA 50312	Line 3.316 <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

- 5a. Total claims from Part 1
- 5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 9,654,706.48
5c.	\$ 9,654,706.48

Fill in this information to identify the case:Debtor name **Sivyer Steel Corporation**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF IOWA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Payroll support services, computer software, & programs.**State the term remaining **1 year**

List the contract number of any government contract _____

**ADP
4900 University Ave
West Des Moines, IA 50266**2.2. State what the contract or lease is for and the nature of the debtor's interest **Canon color and Laser jet printers, Copiers, equipment and maintenance contract ends 4/21/2018**

State the term remaining

List the contract number of any government contract _____

**Advanced Business Systems
4631 44th St.
Moline, IL 61265**2.3. State what the contract or lease is for and the nature of the debtor's interest **5 year contract for bulk Oxygen and Argon storage and ancillary equipment, and installation expired 10/17**

State the term remaining

List the contract number of any government contract _____

**Airgas USA, LLC
1250 W. Washington St.
West Chicago, IL 60185**2.4. State what the contract or lease is for and the nature of the debtor's interest **Frame Program Agreement (casting parts) dated June 2015**

State the term remaining

List the contract number of any government contract _____

**Alstom Transportation Inc.
aka Alstom Transport Canada, Inc.
1 Transit Drive
Hornell, NY 14843**

Debtor 1 **Sivyer Steel Corporation**

Case number (if known)

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- | | | | |
|-------|---|--|--|
| 2.5. | State what the contract or lease is for and the nature of the debtor's interest | 5-year Supply Agreement for castings, dated July 2011 | |
| | State the term remaining | | Ashot Askelon Industries, LTD |
| | List the contract number of any government contract | | PO Box 21
Ashkelon, 78100
ISRAEL |
| <hr/> | | | |
| 2.6. | State what the contract or lease is for and the nature of the debtor's interest | Onsite ATM installation agreement | |
| | State the term remaining | 2 yrs | Cardtronics USA, Inc. |
| | List the contract number of any government contract | | 3250 Briarpark Dr., Suite 400
Houston, TX 77042 |
| <hr/> | | | |
| 2.7. | State what the contract or lease is for and the nature of the debtor's interest | Management Agreement | |
| | State the term remaining | expired? | CC Partners I, LLC |
| | List the contract number of any government contract | | c/o FCF Partners LP
250 West Coventry Court, Suite 201
Milwaukee, WI 53217 |
| <hr/> | | | |
| 2.8. | State what the contract or lease is for and the nature of the debtor's interest | Master Retail Natural Gas Supply and Delivery Agreement for the fiscal year 7/1/17 - 6/30/18 | |
| | State the term remaining | 3 mo | Constellation New Energy - Gas Division, |
| | List the contract number of any government contract | | 9960 Corporate Campus Dr. Suite 2000
Louisville, KY 40223 |
| <hr/> | | | |
| 2.9. | State what the contract or lease is for and the nature of the debtor's interest | Leased property used for Parking Lot | |
| | State the term remaining | perpetual | CP Rail System |
| | List the contract number of any government contract | | 105 South 5th St.
Box 530
Minneapolis, MN 55440-0530 |
| <hr/> | | | |
| 2.10. | State what the contract or lease is for and the nature of the debtor's interest | Contract dated 11/3/17 for commercial pest control at 225 S. 33rd St., Bettendorf; renews yearly | |
| | State the term remaining | 7 months | Iowa-Illinois Termite & Pest Control |
| | | | 3909 North Marquette St.
Davenport, IA 52806 |

Debtor 1 **Sivyer Steel Corporation**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract _____

2.11. State what the contract or lease is for and the nature of the debtor's interest **Postage meter lease**State the term remaining **3 yrs**

List the contract number of any government contract _____

**MailFinance, Inc.
478 Wheelers Farms Rd.
Milford, CT 06461**2.12. State what the contract or lease is for and the nature of the debtor's interest **Lease of Buildings 1 & 3 located at 200 South Bellingham, Bettendorf, IA**State the term remaining **until 5/3/2026**

List the contract number of any government contract _____

**Meadows Warehousing Company
Attn: Sue Jarvis, President
PO Box 1720
Bettendorf, IA 52722**2.13. State what the contract or lease is for and the nature of the debtor's interest **Lease dated August 24, 2012 for lease of Buildings 2 & 4;**State the term remaining **until 5/3/2026**

List the contract number of any government contract _____

**Meadows Warehousing Company
Attn: Sue Jarvis, President
PO Box 1720
Bettendorf, IA 52722**2.14. State what the contract or lease is for and the nature of the debtor's interest **Payroll Processing**State the term remaining **perpetual**

List the contract number of any government contract _____

**Paylocity
3850 N. Wilke Rd.
Arlington Heights, IL 60004**2.15. State what the contract or lease is for and the nature of the debtor's interest **Lease of 2011 FRTL M2 106MD T/A ST TRK and 2010 Stake Flat**State the term remaining **6 months**

List the contract number of any government contract _____

**Ryder Truck Rental, Inc.
dba Ryder Transportation Services
430 W. 76th St
Davenport, IA 52806**

Debtor 1 **Sivyer Steel Corporation**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.16. State what the contract or lease is for and the nature of the debtor's interest

Industrial Gas Agreement dated 4/18/2016 for the purchase of bottle gases (Propane, Argon, Diesel fuel, Unleaded Gasoline). perpetual

State the term remaining

List the contract number of any government contract

**S.J. Smith Co., Inc.
3707 W. River Dr.
Davenport, IA 52802**

2.17. State what the contract or lease is for and the nature of the debtor's interest

Collective Bargaining Agreement October 23, 2017 - October 19, 2019 with United Steel Workers

State the term remaining

List the contract number of any government contract

**United Steelworkers
PO Box 98517
Chicago, IL 60693**

2.18. State what the contract or lease is for and the nature of the debtor's interest

Lease of a Barracuda/BBS890au55 backup server.

State the term remaining

List the contract number of any government contract

8 months

**US Bank Equipment Finance
1310 Madrid St., Suite 101
Marshall, MN 56258**

2.19. State what the contract or lease is for and the nature of the debtor's interest

Sale Bonus Agreements and Retention Agreement

State the term remaining

List the contract number of any government contract

Various Salaried Key Employees

Fill in this information to identify the case:Debtor name **Sivyer Steel Corporation**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF IOWA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

2.1

Street

City State Zip Code

☐ D
☐ E/F
☐ G

2.2

Street

City State Zip Code

☐ D
☐ E/F
☐ G

2.3

Street

City State Zip Code

☐ D
☐ E/F
☐ G

2.4

Street

City State Zip Code

☐ D
☐ E/F
☐ G

Fill in this information to identify the case:Debtor name Sivyer Steel CorporationUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF IOWA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From 1/01/2018 to **Filing Date****Sources of revenue**

Check all that apply

☒ Operating a business☐ Other _____**Gross revenue**

(before deductions and exclusions)

\$3,900,000.00**For prior year:**From 1/01/2017 to 12/31/2017☒ Operating a business☐ Other _____\$38,000,000.00**For year before that:**From 1/01/2016 to 12/31/2016☒ Operating a business☐ Other _____\$34,000,000.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**

(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer***Check all that apply*

Debtor **Sivyer Steel Corporation**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Subject to Further Accounting and Audit		Unknown	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Subject to further accounting and audit		\$0.00	

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
Wells Fargo Vendor Fin Services PO Box 105710 Atlanta, GA 30348-5710	Forklift	4/20/17	\$10,787.86

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Subject to further accounting and audit	Last 4 digits of account number: _____		\$0.00

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
---------------------------	----------------	------------------------------------	----------------

Debtor **Sivyer Steel Corporation**

Case number (if known)

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Gregory Fordham, Individually and as Special Administrator of the Estate of Harold Fordham, deceased v. A. W. Chesterton, Inc., Sivyer Steel Corporation, et al 2016-L-009281	Case filed 9-23-16 alleged asbestos-caused disease (mesothelioma) as a result of exposure to asbestos at debtor's Bettendorf facility; case dismissed as to debtor	Circuit Court of Cook County - Law Div. Richard J. Daley Center 50 W. Washington, Room 801 Chicago, IL 60602	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.2.	Aerotek, Inc. v. Sivyer Steel Corporation LACE129351	Suit on contract Judgment 10-25-17	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.3.	Crescent Electric Supply Company v. Sivyer Steel Co. LACE128218	Suit on account Judgment 12-27-16	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.4.	Dell Financial Services L.L.C. v. Sivyer Steel Corporation D-1-GN-17-001151	Suit for computer equipment and lease Judgment	Travis County 98th Judicial District Court PO Box 1748 Austin, TX 78701	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.5.	EMC Insurance/IA v. Sivyer Steel Corp. LACE129072	Suit on insurance premiums Judgment 11-13-17	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.6.	Federal Insurance Company v. Sivyer Steel Corporation LACE128929	Suit on worker's compensation insurance premiums Judgment 8-4-17	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.7.	Gett Industries, Inc. v. Sivyer Steel Corporation No. 15AR208	Suit on account Judgment 7-11-17	Rock Island County Circuit Court 14th Judicial Circuit 210 15th Street Rock Island, IL 61201	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.8.	KD Industries of Illinois, Inc. v. Sivyer Steel Corp. 17-SC-17K	Suit on account Judgment 2-14-17	Henry County 14th Judicial Circuit Court Kewanee Division 401 East Third Street Kewanee, IL 61443-1000	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.9.	CT Products, LLC v. Sivyer Steel Corporation LACE127974	Suit for services Judgment 5-25-17	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

Debtor **Sivyer Steel Corporation**

Case number (if known)

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.10	L&M Accounts Inc. (for Northwest Mechanical, Inc.) v. Sivyer Steel Corporation SCSC210031	Suit for services Judgment 7-19-17	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.11	Motion Industries, Inc. v. Sivyer Steel Corporation LACE128935	Suit on account Judgment 6-27-17	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.12	N & M Transfer Co., Inc. v. Sivyer Steel Corporation LACE128914	Suit on account Judgment 7-11-17	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.13	O'Connell Machinery Co., Inc. v. Sivyer Steel Corp. SCSC210194	Suit on account Judgment 5-24-17	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.14	Shenyang Jinli Metals & Minerals Imp & Exp Co., Ltd. v. Sivyer Steel Corporation LACE128765	Suit on promissory note and merchandise Judgment 11-21-17	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.15	Pedro Mejia v. Sivyer Steel Corporation LACE128299	Suit for personal injuries	Scott County District Court 400 West 4th Street Davenport, IA 52801	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Debtor **Sivyer Steel Corporation**

Case number (if known)

Description of the property lost and how the loss occurred**Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

Dates of loss**Value of property lost****Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.**Who was paid or who received the transfer?**
Address**If not money, describe any property transferred****Dates****Total amount or value**11.1. **Bradshaw Fowler Proctor & Fairgrave PLC**
801 Grand Ave Suite 3700
Des Moines, IA 50309**3/9/18****\$75,000.00****Email or website address**
www.bradshawlaw.com**Who made the payment, if not debtor?****12. Self-settled trusts of which the debtor is a beneficiary**List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.☒ None.**Name of trust or device****Describe any property transferred****Dates transfers were made****Total amount or value****13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.**Who received transfer?**
Address**Description of property transferred or payments received or debts paid in exchange****Date transfer was made****Total amount or value****Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply**Address****Dates of occupancy**
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

Debtor **Sivyer Steel Corporation**

Case number (if known)

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☐ None

Depository institution name and address

Names of anyone with access to it
Address

Description of the contents

Do you still have it?

Safe on location

Cathy Meinsma
Keith Kramer

Petty Cash and important papers

☐ No
☒ Yes
20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐ None

Facility name and address

Names of anyone with access to it

Description of the contents

Do you still have it?

Warehouse
200 S. Bellingham
Bettendorf, IA 52722

multiple parties

inventory, machinery and customer owned pattern equipment

☐ No
☒ Yes

Debtor **Sivyer Steel Corporation**

Case number (if known)

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
miscellaneous		Subject to further accounting and audit	\$0.00

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
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Debtor **Sivyer Steel Corporation**

Case number (if known) _____

Business name address**Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

Dates business existed**EIN:****From-To 2/2011-current**

25.1. **Sivyer Steel (HK) Limited**
20th Floor, Suite 2006
340 Queen's Road Central
Hong Kong

Importing and exporting steel**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None**Name and address****Date of service****From-To**

26a.1. **Vrakas/Blum**
445 S. Moorland Rd. Suite 400
Brookfield, WI 53005

2013 to the present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None**Name and address****Date of service****From-To**

26b.1. **Vrakas/Blum**
445 S. Moorland Rd. Suite 400
Brookfield, WI 53005

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None**Name and address****If any books of account and records are unavailable, explain why**

26c.1. **Vrakas/Blum**
445 S. Moorland Rd. Suite 400
Brookfield, WI 53005

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None**Name and address**

26d.1. **TBK Bank SSB**
f/k/a Triumph Community Bank NA
852 Middle Rd.
Bettendorf, IA 52722

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No☒ Yes. Give the details about the two most recent inventories.

Debtor **Sivyer Steel Corporation**

Case number (if known)

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1	Vrakas/Blum	12/31/17	subject to audit and accounting
	Name and address of the person who has possession of inventory records		
	Vrakas/Blum 445 S. Moorland Rd. Suite 400 Brookfield, WI 53005		

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Paul Raab	250 W. Coventry Court, Ste. 201 Milwaukee, WI 53217	Board Member	0%
Scott Roeper	250 W. Coventry Court, Ste. 201 Milwaukee, WI 53217	Board Member	0%
Art Gibeaut	225 S. 33rd St. Bettendorf, IA 52722	Board Member	0%
Keith Kramer	225 S. 33rd St. Bettendorf, IA 52722	President/CEO	0%
Cathy Meinsma	225 S. 33rd St. Bettendorf, IA 52722	CFO/Secretary	0%
Robert Silhacek	Turning Point Managment Advisors	Chief Restructuring Officer	0%
FCF Partners, LP	515 Crescent Lane Thiensville, WI 53092	Sole Shareholder	100%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

Debtor **Sivyer Steel Corporation**

Case number (if known) _____

- ☐ No
- ☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Subject to further accounting & audit			
	Relationship to debtor			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
- ☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
- ☒ Yes. Identify below.

Name of the pension fund	Employer Identification number of the parent corporation
Sivyer Steel Corporation Hourly Employees' 401(k) Plan	EIN:
Sivyer Steel Corporation Salaried Employees' Profit Sharing Plan	EIN: 39-0617810 Plan No. 4
Sivyer Steel Corporation Retirement Income Plan	EIN: 39-0617810 Plan No. 2
Sivyer Steel Corporation Postretirement Welfare Plan	EIN:

Debtor **Sivyer Steel Corporation**

Case number (if known)

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **March 14, 2018**

/s/ Keith Kramer

Signature of individual signing on behalf of the debtor

Keith Kramer

Printed name

Position or relationship to debtor **President**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

United States Bankruptcy Court
Southern District of Iowa

In re Sivyer Steel Corporation Debtor(s) Case No. Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
FCF Partners LP 250 West Coventry Court, Suite 201 Milwaukee, WI 53217	Series A	20,689.56	Preferred Stock

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **President** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date March 14, 2018 Signature /s/ Keith Kramer
Keith Kramer

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
Southern District of Iowa**

In re **Sivyer Steel Corporation**

Debtor(s)

Case No.

Chapter

11

**VERIFICATION OF MASTER ADDRESS LIST
ON PAPER (CREDITOR MATRIX)**

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the attached Master Address List (creditor matrix), consisting of 33 pages, and that it is true and correct to the best of my knowledge, information, and belief.

Date: **March 14, 2018**

/s/ Keith Kramer

Keith Kramer/President

Signer/Title

VER_MTRX (Rev. 04/00)

2 & 92 Used Truck Parts, Inc.
PO Box 181
Silvis, IL 61282

A & A Air Conditioning, Inc.
201 48th St
Moline, IL 61265

A L L Equipment
PO Box 909
Moline, IL 61265

Acadian Lawn & Landscape
1921 127th Ave
Milan, IL 61264

Acro Manufacturing Corporation
5429 North Towne Place
Cedar Rapids, IA 52402

ADP
4900 University Ave
West Des Moines, IA 50266

ADP Commercial Leasing
3726 Solutions Center
Chicago, IL 60677-3007

ADP Commercial Leasing, LLC
15 Waterview Blvd.
Parsippany, NJ 07054

ADP, LLC
PO Box 842875
Boston, MA 02284-2875

Advanced Business Systems
4631 44th St.
Moline, IL 61265

Advanced Environ. Testing & Abatement
7224 Jebens Ave
Davenport, IA 52806

Aeromet Engineering Inc.
107 Adams St.
Jefferson City, MO 65101

Aerotek Commercial Staffing, Inc.
PO Box 198531
Atlanta, GA 30384-8531

Aerotek, Inc.
c/o Blitt and Gaines, P.C.
2536 73rd Street
Urbandale, IA 50322

Ahlers & Cooney, P.C.
100 Court Ave, Suite 600
Des Moines, IA 50309

Airgas USA, LLC
PO Box 802576
Chicago, IL 60680-2576

Airgas USA, LLC
1250 W. Washington St.
West Chicago, IL 60185

Airrco LLC
4 Deerwood Dr.
Blue Grass, IA 52726

Alignex, Inc.
7200 Metro Blvd
Edina, MN 55439

Allied Electronics
Accts Receivable Dept
PO Box 2325
Fort Worth, TX 76113

Alltest, Inc.
4711 Brady St. Suite 35
Davenport, IA 52806-3955

Alstom Transportation Inc.
aka Alstom Transport Canada, Inc.
1 Transit Drive
Hornell, NY 14843

Alter Trading Corporation
Lockbox 774903
4903 Solution Center
Chicago, IL 60677-4009

Altorfer Rents
PO Box 1347
Cedar Rapids, IA 52406-1347

Altorfer, Inc.
PO Box 1347
Cedar Rapids, IA 52406-1347

Ameralloy Steel Corporation
7848 N. Merrimac
Lisle, IL 60532-7090

Ameri-source Specialty Products, Inc.
5372 Enterprise Blvd
Bethel Park, PA 15102

American Colloid Co.
NW 5020
PO Box 1450
Minneapolis, MN 55458-5020

American Electric Control Corp.
1600 W. 200 South
Lindon, UT 84042

American Express
PO Box 650448
Dallas, TX 75265-0448

American Foundry Society
35169 Eagle Way
Chicago, IL 60678-1351

American Pattern & CNC Works Inc.
5540 Westminster Dr.
Cedar Falls, IA 50613-6948

Anderson Commercial Concrete, Inc.
21254 Brady St.
Davenport, IA 52806

Ashot Askelon Industries, LTD
PO Box 21
Ashkelton, 78100
ISRAEL

ASI International LTD
1440 E 39th St.
Cleveland, OH 44114

Ask Chemicals
PO Box 360615
Pittsburgh, PA 15251-6615

Ask Chemicals LP
495 Metro Place South, Ste. 250
Dublin, OH 43017

Auburn Systems, LLC
800 Cummings Centers Suite 355W
Beverly, MA 01915

Audiology Consultants PC
2215 E 52nd St. Suite 2
Davenport, IA 52807

B & E Pattern Co.
N60 W152000 Bobolink Ave
Menomonee Falls, WI 53051

B & L Information Systems, Inc.
4707 Rambo Rd.
Bridgman, MI 49106

Balcon
3215 Nebrska Ave
Council Bluffs, IA 51501

Barton Solvents, Inc.
PO Box 970
Bettendorf, IA 52722-0017

Batteries & Bulbs
901 E. Kimberly Rd.
Davenport, IA 52807

BDI - Bearing Distributors
Attn: Chip Goneyzy
8000 Hub Parkway
Cleveland, OH 44125

Behr Iron & Metal
32500 Collection Center Dr.
Chicago, IL 60693-0500

Berg Engineering & Sales, Inc.
3893 Industrial Ave
Rolling Meadows, IL 60008

Big River Equipment Co. Inc.
5875 State St.
Bettendorf, IA 52722

Blackhawk Specialty Products, Inc.
Blackhawk Sales Company
2116 5th Ave
Rock Island, IL 61201

Block Ready Mix Group
3636 W. River Dr.
Davenport, IA 52802

Bodycote Thermal Processing
7316 Durand Ave
Melrose Park, IL 60160

Bourn & Koch, Inc.
JP Morgan Chase
36856 Eagle Way
Chicago, IL 60678-1368

Bowe Machine Co.
PO Box 1570
Bettendorf, IA 52722-1570

Brake Products, Inc.
PO Box 23547
Chagrin Falls, OH 43301

Bremen Castings, Inc.
PO Box 10762
Fort Wayne, IN 46853-0762

C-Spec
PO Box 5188
Concord, CA 94524

The C.A. Lawton Co.
1950 Enterprise Dr.
PO Box 5430
De Pere, WI 54115-5430

Cal-Rite Corporation
1665 Quincy Ave #103
Naperville, IL 60540

Canfield & Joseph, Inc.
PO Box 471285
Tulsa, OK 74147

Canon Financial Services, Inc.
14904 Collections Center Dr.
Chicago, IL 60693-0149

Cardtronics USA, Inc.
3250 Briarpark Dr., Suite 400
Houston, TX 77042

Carlin Automation Inc.
PO Box 3431
1725 20th St.
Rock Island, IL 61201

Carpenter Brothers, Inc.
Box 88113
Milwaukee, WI 53288-0113

CarQuest Auto Parts Stores
PO Box 404875
Atlanta, GA 30384-4875

Cartridge World - Utica
5252 Utica Ridge Rd.
Davenport, IA 52807-3872

Caterpillar Financial Services Corp
PO Box 730669
Dallas, TX 75373-0669

CC Partners I, LLC
c/o FCF Partners LP
250 West Coventry Court, Suite 201
Milwaukee, WI 53217

CDW Direct LLC
PO Box 75723
Chicago, IL 60675-5723

CEM Corporation
12750 Collections Center Dr.
Chicago, IL 60693

Certified Laboratories
23261 Network Place
Chicago, IL 60673-1232

CH Robinson Co. Inc.
PO Box 9121
Minneapolis, MN 55480-9121

Chemsearch
23261 Network Place
Chicago, IL 60673

Christy Refractories Co. LLC
PO Box 6167
Carol Stream, IL 60197-6167

Cintas Corporation #762
PO Box 631025
Cincinnati, OH 45263-1025

Citibank NA c/o SGS North America
PO Box 2502
Carol Stream, IL 60132-2502

Citrix Online, LLC
File 50264
Los Angeles, CA 90074-0264

Coface North America, Inc.
c/o James L. O'Brien Assoc Inc.
1035 W. Lake St.
Chicago, IL 60607-1726

Communication Innovators Inc.
1301 NE 56th St.
Pleasant Hill, IA 50327

Complete Heat Treating
125 E. Greenfield Ave
Milwaukee, WI 53204-2937

Con-Way Freight
PO Box 5160
Portland, OR 97208-5160

Conductix, Inc.
PO Box 809090
Chicago, IL 60680

Constellation New Energy - Gas Division,
9960 Corporate Campus Dr. Suite 2000
Louisville, KY 40223

Continental Fire Sprinkler Co.
4518 S. 133rd St.
Omaha, NE 68137

Control Application & Maintenance, Inc.
2832 5th St.
Rock Island, IL 61201

Control Specialists
PO Box 6770
Evansville, IN 47719-0770

Cores for You
160 Hamilton Industrial Park
Hamilton, IL 62341

Coventry Capital Partners, Inc.
250 W. Coventry Ct. Suite 201
Milwaukee, WI 53217

CP Rail System
105 South 5th St.
Box 530
Minneapolis, MN 55440-0530

Crack Eliminator
PO Box 235
Oak Creek, WI 53154

Crane Pro Parts
PO Box 644994
Pittsburgh, PA 15264-4994

Crescent Electric Supply
PO Box 500
East Dubuque, IL 61025-4420

Crescent Electric Supply Company
c/o Piper Hughes, Esq.
PO Box 2165
Cedar Rapids, IA 52406

CS Technologies
PO Box 260
Eldridge, IA 52748-0260

CT Corporation
PO Box 4349
Carol Stream, IL 60197-4349

CT Products, LLC
c/o McDonald, Woodward & Carlson, P.C.
3432 Jersey Ridge Road
Davenport, IA 52807

CT Products, LLC
PO Box 4810
Davenport, IA 52808-4810

Culligan of Davenport
701 W. 76h St.
Davenport, IA 52806

Dan's Overhead Doors
1810 Dan's Drive NW
North Liberty, IA 52317

Davenport Electric Contract Co.
Po Box 4229
Davenport, IA 52808

David J. Joseph Co.
Brokerage Services Division
PO Box 632960
Cincinnati, OH 45263-2960

Hal Davis
920 College Ave
Davenport, IA 52803

Dearboard Crane and Engineering Co
1133 E. Fifth St.
Mishawaka, IN 46544

Dell Financial Services
Payment Processing Center
PO Box 5292
Carol Stream, IL 60197-5292

Dell Financial Services L.L.C.
PO Box 5292
Carol Stream, IL 60197-5292

Dell Financial Services L.L.C.
Mail Stop-PS2DF-23
One Dell Way
Round Rock, TX 78682

Dell Marketing LP
c/o Dell USA LP
PO Box 802816
Chicago, IL 60680-2816

Dietert Foundry Testing Equipment
9190 Roselawn
Detroit, MI 48204

Dimensional Graphics
1320 West Kimberly Rd.
Davenport, IA 52806

Direct Path
fka Labrinth Healthcare
633 w. Wisconsin Ave
Milwaukee, WI 53203

Diversified Benefit Services, Inc.
PO Box 260
Hartland, WI 53029

Diversified Nonferrous Tech Inc,
PO Box 85
Trussville, AL 35173-0085

Dohrn Transfer Company
PO Box 83138
Chicago, IL 60691-0138

E91, Inc.
PO Box 310055
Des Moines, IA 50331-0055

Eagle Engineering, Inc.
PO Box 64
2701 S. 1st St.
Eldridge, IA 52748

Earle M. Jorgensen Co. Quad Cities
75 Remittance Dr. Suite 6445
Chicago, IL 60675-6445

Eastern Iowa Tire
8528 Northwest Blvd
Davenport, IA 52806

EasyPower, LLC
7730 SW Mohawk St.
Tualatin, OR 97062

EDM ZAP Parts, Inc.
1108 Front St.
Lisle, IL 60532-2258

Electronic Engineering
5000 Tremont Ave Suite 201
Davenport, IA 52807

Embroidme-Davenport
2222 E 53rd St. Suite 2
Davenport, IA 52807

EMC Insurance Companies
Abby Freerksen - Accounting
717 Mulberry St.
Des Moines, IA 50309

EMC Insurance/IA
c/o Piper Hughes, Esq.
PO Box 2165
Cedar Rapids, IA 52406-2165

Energetics
4901 Prairie Dock Drive
Madison, WI 53718

Engles Trucking Services, Inc.
PO Box 1090
Franklin, PA 16323

Enviromark
7301 Vine St. Ct.
Davenport, IA 52806

Eriez Manufacturing
2200 Asbury Rd.
Erie, PA 16506

Exact Metrology Inc.
PO Box 7536
Algonquin, IL 60102

Fastenal Company
PO Box 978
Winona, MN 55987-0978

FCF Partners LP
250 West Coventry Court, Suite 201
Milwaukee, WI 53217

FCF Partners, LP
515 Crescent Lane
Thiensville, WI 53092

Fed Ex
PO Box 94515
Palatine, IL 60094-4515

Fed Ex Freight
Dept CH
PO Box 10306
Palatine, IL 60055-0306

Federal Insurance Company
c/o McDonald, Woodward & Carlson, P.C.
3432 Jersey Ridge Road
Davenport, IA 52807

Fermet Steel & Metal Works, Ltd.
PO Box 076
Kiryat, Atta 28100
Israel

Ferrellgas, LP
PO Box 173940
Denver, CO 80217-3940

First Insurance Funding
450 Skokie Blvd, Suite 1000
Northbrook, IL 60062-7917

Flash, Inc.
PO Box 574
Green Lake, WI 54941

Flex-Pac, Inc.
PO Box 623129
Indianapolis, IN 46262-3129

Ford Photography
2008 15th St. A
Moline, IL 61265

Foseco, Inc.
5645 Collections Center Dr
Chicago, IL 60693

Foundry Sand Service, LLC
5401 Victoria Dr. Suite 100
Davenport, IA 52807

G & K Services
7813 Solution Center
Chicago, IL 60677-7008

G & W Patterns, Inc.
3875 S. Woelfel Rd
New Berlin, WI 53146

Gardner Engineering Inc.
3825 Hickory Grove Road
Davenport, IA 52806

General Electric Company
16201 Three Wide Drive E 206
Fort Worth, TX 76177

General Kinematics Corp
PO Box 345
Crystal Lake, IL 60039-0345

General Pattern Corp
235 40th St.
Moline, IL 61265

Gett Industries, Inc.
c/o Steven E. Balk, Esq.
105 7th Street
Silvis, IL 61282

Gett Industries, Ltd.
7307 50th
Milan, IL 61264

Glass Service Center
4401 11th St.
Macon, GA 31201

Global Equipment Co., Inc.
29833 Netowrk Place
Chicago, IL 60673-1298

Godfrey & Kahn
Bin #318
Milwaukee, WI 53288-0318

Grainger
Dept 802717033
Palatine, IL 60038-0001

Graphic Products
PO Box 4030
Beaverton, OR 97076-4030

Guaranteed Pattern
1135 Pioneer B Trail
Waukesha, WI 53186

Gudgeon Thermfire International, Inc.
420 Neptune Cres
London, Ontario N6M 1A1
CANADA

Hach Co.
2207 Collections Center Dr.
Chicago, IL 60693

Hagemeyer North America Inc.
Po Box 404753
Atlanta, GA 30384-4753

Harbor Freight Tools USA Inc.
PO Box 748076
Los Angeles, CA 90074-8076

Hastie Mining & Trucking
Rt. 1 Box 55
Cave in Rock, IL 62919

Hempel Pipe & Supply Inc.
921 S. Rolff St.
Davenport, IA 52802

Henry County Clerk
RE: 17-SC-17K
14th Judicial Circuit, Kewanee Division
401 East Third Street
Kewanee, IL 61443

Heraeus Electro-Nite Co.
88736 Expedite Way
Chicago, IL 60695-1700

Holland Inc.
27052 Network Place
Chicago, IL 60673-1270

Holmes Murphy & Associates
3001 Westown Parkway
West Des Moines, IA 50266

Holming Fan & Fabrication
6900 N. Teutonia Ave
Milwaukee, WI 53209

Home Depot Credit Services
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PO Box 9055
Des Moines, IA 50368-9055

Hometown Plumbing & Heating
13606 118th Ave
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Shuttleworth & Ingersoll, PLC
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IFM Efector Inc.
PO Box 8538-307
Philadelphia, PA 19171-0307

Insight Direct USA, Inc.
6820 S Harl Ave
Tempe, AZ 85283

Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

Iowa American Water
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Palatine, IL 60094-4551

Iowa Department of Natural Resources
Wallace Building 4th Floor
502 E 9th St.
Des Moines, IA 50319

Iowa Department of Revenue
Hoover State Office Building
PO Box 10471
Des Moines, IA 50306-0471

Iowa Fluid Power, Inc.
PO Box 10107
Cedar Rapids, IA 52410-0107

Iowa Illinois Termite & Pest Inc.
3909 Marquette St.
Davenport, IA 52806

Iowa Machinery & Supply, Inc.
PO Box 797
Des Moines, IA 50303

Iowa Workforce Development
Unemployment Insurance Tax Bureau
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Des Moines, IA 50319

Iowa-American Water
5201 Grand Ave
Davenport, IA 52807

Iowa-Illinois Termite & Pest Control
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Davenport, IA 52806

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Cedar Rapids, IA 52410-0045

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Davenport, IA 52807

JP Morgan Chase
PO Box 4475
Carol Stream, IL 60197-4475

K & K True Value Hardware
1818 Grant St.
Bettendorf, IA 52722

K & M Machine Fabricating Inc.
PO Box 218
20745 M-60 East
Cassopolis, MI 49031-0218

Karden Sales & Consulting, Inc.
9114 Virginia Rd. Unit 100
Lake in the Hills, IL 60156

KD Industries of Illinois, Inc.
c/o Barash & Everett, LLC
211 West Second Street
Kewanee, IL 61443

KD Industries of Illinois, Inc.
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Kewanee, IL 61443

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PO Box 641807
Pittsburgh, PA 15264-1807

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dba Guardian Medical Logistics
PO Box 790379
Saint Louis, MO 63179

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1411 W. 5th St.
Coal Valley, IL 61240

L&M Accounts Inc.
(for Northwest Mechanical, Inc.)
c/o Dergo Law, P.L.L.C.
2200 52nd Avenue
Moline, IL 61265

Lanco Slings & Rigging, Inc.
4960 41st St. Court
Moline, IL 61265

Lane & Waterman
220 North Main St. Suite 600
Davenport, IA 52801-1987

Lanzen, Inc.
30980 Groesbeck Highway
Roseville, MI 48066

Liebovich Steel & Aluminum Co.
PO Box 1779
Cedar Rapids, IA 52406

Linco Refractory Supply Inc.
PO Box 515
Coal Valley, IL 61240-0515

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20th Floor, Suite 206
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Hong Kong
CHINA

Linfield Corporate Services, Ltd.
901B, Kinwick Centre
32 Hollywood Rd. Central
Hong Kong
CHINA

Linwood Mining & Minerals Corp
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Davenport, IA 52807

Lloyd's Register Quality Assurance
PO Box 301030
Dallas, TX 75303-1030

Logan Contractors Supply Inc.
PO Box 5283
Des Moines, IA 50305

Macawber Engineering, Inc.
1829 Clydesdale St.
Maryville, TN 37801-3796

Machine Tooling Technology
420 Harvester Ct.
Wheeling, IL 60090

Magma Foundry Technologies
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Schaumburg, IL 60173

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Dallas, TX 75312-3682

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Milford, CT 06461

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2701 Clines Ford Dr.
Belvidere, IL 61008

Manley Brothers of Indiana, Inc.
PO Box 80
300 S. Vermillion st.
Troy Grove, IL 61372-0080

Marco, Inc.
NW 7128, PO Box 1450
Minneapolis, MN 55485-7028

Materials & Equipment Inc.
c/o Norm Boelk
5840 Jenny Lane
Bettendorf, IA 52722

Max's Cab Company
3112 Chateau Knoll
Bettendorf, IA 52722

McGuire Sponsel
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Indianapolis, IN 46204

McMaster Carr Supply Co.
PO Box 7690
Chicago, IL 60680-7690

Meadows Warehousing Company
Attn: Sue Jarvis, President
PO Box 1720
Bettendorf, IA 52722

Meadows Warehousing company
2250 W 76th St
Davenport, IA 52806

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Carol Stream, IL 60197-5744

Pedro Mejia
c/o Robert T. Rosenstiel, Esq.
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Rock Island, IL 61204-4298

Metal Surgery Milwaukee Ltd.
PO Box 370515
Milwaukee, WI 53237-0515

Metamora Industries
N8514JO
503 N. Niles St.
Metamora, IL 61548-0739

Metcast Service Tech Resources Inc.
Blast Cleaning Technologies
16211 W. Lincoln Ave
New Berlin, WI 53151

Metlife Industries
141 Mong Way
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Reno, PA 16343

Metro Tools & Abrasives
PO Box 788
Cedar Rapids, IA 52406-0788

Mid States Heating Services Inc.
3900 2nd Ave
Moline, IL 61265

Mid States Specialty Sales
c/o David A. Hunt
5440 1st Ave
Moline, IL 61265

MidAmerican Energy
PO Box 8020
Davenport, IA 52808-8020

MidAmerican Energy Services, LLC
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Davenport, IA 52808-8019

Midstate Manufacturing Co
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Galesburg, IL 61401

Midwest Air Compressor LLC
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Waupaca, WI 54981

Midwest Filtration LLC
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Cincinnati, OH 45246

Midwest Therapy Centers
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Davenport, IA 52808-3488

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Milwaukee, WI 53212

Mississippi Laser Inc.
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Milan, IL 61264

Mitts & Merrill LP
28623 Lake Industrial Blvd
Tavares, FL 32778

Modular Space Corporation
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Chicago, IL 60693-0126

Tim Mohs
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Morton, IL 61550

Motion Industries
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Chicago, IL 60693

Motion Industries, Inc.
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Urbandale, IA 50322

MRS - The Management Association
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Waukesha, WI 53188

MSC Industrial Supply Co.
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Neenah, WI 54956-9752

N&M Transfer Co. Inc.
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Neenah, WI 54956-9752

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Yunlong Town
Ningbo 315135
CHINA

Ningbo Qianhao Metal Product Co.
2086 Ningheng South Rd.
Hengxi Town 315131
CHINA

Ningbo Yong Chao Mould Co. Ltd
Baqiao Region
Jiangkou St.
Zhejiang Province 315504
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Boulder, CO 80301

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Davenport, IA 52807

Nott Company
NW-7779
PO Box 1450
Minneapolis, MN 55485-7779

NSL Central Testing LLC
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Cleveland, OH 44125

O'Connell Machinery Co. Inc.
175 Great Arrow Ave
Buffalo, NY 14207

O'Connell Machinery Co., Inc.
c/o Piper Hughes, Esq.
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Cedar Rapids, IA 52406

Oerlikon Fairfield Drive System Inc.
PO Box 7940
US 52 South
Lafayette, IN 47903

Oertel Sheet Metal
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Olderog Tire Service Inc.
2316 Rockingham Rd.
Davenport, IA 52802

Omega Engineering Inc.
PO Box 405369
Atlanta, GA 30384-5369

Overhead Door Co. of Peoria
2376 Washington Rd.
Washington, IL 61571

Palmer Manufacturing & Supply Inc.
PO Box 2579
Springfield, OH 45501

Parts Engineering Co. LLC
PO Box 300048
Duluth, GA 30096-0300

Paylocity
3850 N. Wilke Rd.
Arlington Heights, IL 60004

PC Connection
730 Milford Rd.
Merrimack, NH 03054-4631

Peerless Energy Systems LLC
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Omaha, NE 68127

Pension Benefit Guaranty Corp.

Per Mar Security
PO Box 1101
Davenport, IA 52805

Petersen Plumbing & Heating
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Davenport, IA 52802

PGI
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Atlanta, GA 30384-4351

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Saint Paul, MN 55107

Plant Equipment Co. Inc.
PO box 3157
Rock Island, IL 61204-3157

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Davenport, IA 52804

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Warrendale, PA 15086

PRIAC
Prudential Investment Mgmt Svcs
280 Trumbull St. H08
Hartford, CT 06103

Pride Machine & Tool, Inc.
1821 North 30th Ave
Melrose Park, IL 60160

Prince Minerals, Inc.
PO Box 71442
Chicago, IL 60694-1442

QC Analytical Services LLC
1798 Iowa Drive
Le Claire, IA 52753

QC Transport, Inc.
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Bettendorf, IA 52722

Quad Cities Chamber of Commerce
622 19th St.
Moline, IL 61265

Quad City Occupational Health
PO Box 3488
Davenport, IA 52808-3488

Quad City Safety Inc.
PO Box 1720
Davenport, IA 52809-1720

Quad City Testing Lab Inc.
21112 Scott Park Rd.
Davenport, IA 52807

Quant Corporation
400 Travis lane Unit 28
Waukesha, WI 53189

Quincy Compressor LLC
Department 3427, Lockbox 893427
PO Box 123427
Dallas, TX 75312-3427

R&L Carriers
PO Box 10020
Port William, OH 45164

R-Con NDT INV
5605 Freitag Dr.
Menomonie, WI 54751

Raynor Door Inc of the Quad Cities
2370 Westlake Blvd
Davenport, IA 52804

Recycling Solutions & Consultants
PO Box 468
Wood River, IL 62095

Red Wing Shoe Store
3014 E 53rd St.
Davenport, IA 52807

Red Wing Shoe Store
3301 Avenue of the Cities
Moline, IL 61265

Redridge Lender Services LLC
PO Box 776068
Chicago, IL 60677-6068

Refractory & Insulation Supply, Inc.
PO Box 391
Bettendorf, IA 52722-0007

Regalia Manufacturing Co.
PO Box 4448
Rock Island, IL 61204-4448

Republic Companies
PO Box 3807
Davenport, IA 52808

Republic Services
PO Box 9001154
Louisville, KY 40290-1154

Rexco Equipment
dba Bobcat of Quad Cities
1925 Blairs Ferry Rd NE
Cedar Rapids, IA 52402

Richardson Manufacturing Co.
2209 Old Jacksonville Rd.
Springfield, IL 62704

Rilco Fluid Care, Inc.
1320 1st St.
Rock Island, IL 61201

RIM Logistics Ltd
Deptment 4026
PO Box 4653
Hinsdale, IL 60522-4653

River Valley Cooperative
PO Box 256
Eldridge, IA 52748

RK Dixon
PO Box 856699
Minneapolis, MN 55485-6699

Road Machinery & Supplies
SDS 12-0749
PO Box 86
Minneapolis, MN 55486-0749

Robert Half Finance & Accounting
PO Box 743295
Los Angeles, CA 90074-3295

Rock Island County Clerk
RE: No. 15AR208
14th Judicial Circuit Court
210 15th Street
Rock Island, IL 61201

Rock Island Electric Motor Inc.
PO Box 6190
Rock Island, IL 61204-6190

Rock Island Lubricants and Chemical, Inc
PO Box 5015
Rock Island, IL 61204-5015

Rockford Rigging
5401 Main Sail
Roscoe, IL 61073

Roemer Machine & Welding Co.
3053 Research Pkwy
Davenport, IA 52806

Rogan, Inc.
PO Box 908
Bettendorf, IA 52722

Russell Companies
1435 Brown St.
Bettendorf, IA 52722

Ryan & Assoc. Inc.
10955 160th St.
Davenport, IA 52804

Ryder Transportation Services
PO Box 96723
Chicago, IL 60693-6723

Ryder Truck Rental, Inc.
dba Ryder Transportation Services
430 W. 76th St
Davenport, IA 52806

S.J. Smith Co., Inc.
3707 W. River Dr.
Davenport, IA 52802

Sadler Machine Co.
4150 Thomas Dr. SW
PO Box 1716
Cedar Rapids, IA 52406-1716

Sadler Machine Co.
c/o Terry L. Gibson
2501 Grand Ave Suite B
Des Moines, IA 50312

Safety Kleen Corp
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Dallas, TX 75265-0509

Schebler Company
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Des Moines, IA 50331-0181

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Dallas, TX 75201

Schwenker & Mouglin, Inc.
1614 5th Ave
Moline, IL 61265

Scott County Clerk
RE: LACE129351
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Clerk
RE: LACE128218
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Clerk
RE: LACE129072
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Clerk
RE: LACE128929
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Clerk
RE: LACE127974
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Clerk
RE: LACE128935
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Clerk
RE: LACE128914
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Clerk
RE: LACE128765
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Clerk
RE: LACE128299
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Small Claims Clerk
RE: SCSC210031
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Small Claims Clerk
RE: SCSC210194
Scott County Courthouse
400 West 4th Street
Davenport, IA 52801-1034

Scott County Treasurer
600 W 4th St.
Davenport, IA 52801-1003

Sedona Technologies Inc.
600 35th Ave
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Seither & Cherry Quad Cities, Inc.
611 E 59th St.
Davenport, IA 52807

Selective Insurance
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Shenyang Jinli Metals & Minerals
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Special Olympics Iowa
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Clive, IA 50325-0664

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Speyside Machining Holdings, LLC
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Syntron Material Handling, LLC
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TAG Communications, Inc.
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Tall Grass Business Resources, Inc.
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TBK Bank SSB
fka Triumph Community Bank NA
852 Middle Rd.
Bettendorf, IA 52722

TBK Bank SSB
c/o J. Mark Fisher, Esq.
Schiff Hardin LLP
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TBK Bank, SSB
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Dallas, TX 75312-1175

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Clinton Township, MI 48036

Timberline Pallet & Skid, Inc.
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East Moline, IL 61244

Tinker Omega Manufacturing
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Springfield, OH 45503

Titan Machinery Inc.
3136 76th St. West
Davenport, IA 52806

Tool House, Inc.
5205 South Emmer Dr.
New Berlin, WI 53151-1194

Toolcraft Co. Inc.
W194 N11092 Kleinmann Dr.
Germantown, WI 53022

Total Quality Logistics
PO Box 634558
Cincinnati, OH 45263-4558

Travis County Clerk
RE: D-1-GN-17-001151
Travis County 98th District Court
PO Box 1748
Austin, TX 78767

Tri Aerospace LLC
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Terre Haute, IN 47803

Tri State Fire Control, Inc.
2316 4th Ave
Moline, IL 61265

Tri-City Electric Co.
6225 N Brady St.
Davenport, IA 52806-0002

Trimborn Tooling Design LLC
W235 S6720 Salem Court
Waukesha, WI 53189-9379

Trinity Consultants
12770 Merit Dr. Suite 900
Dallas, TX 75251

Tuf-Lok International
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Madison, WI 53705

Tully Industrial Inc.
PO Box 249
Davenport, IA 52805

Tungsten Network Inc.
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U.S. Bank Equipment Finance
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Marshall, MN 56258

U.S. Energy Services, Inc.
32604 Collection Center Dr.
Chicago, IL 60693-0604

UI Labs
Attn: DMDII Finance
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Chicago, IL 60642

United Auto Workers
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Des Moines, IA 50313

United Steel Workers of America
PO Box 98517
Chicago, IL 60693

United Steelworkers
PO Box 98517
Chicago, IL 60693

Universal Welding and Engineering
1709 Pearl St.
Waukesha, WI 53186

UPS Freight
28013 Network Place
Chicago, IL 60673-1280

US Bank Equipment Finance
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Saint Louis, MO 63179-0448

US Bank Equipment Finance
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Marshall, MN 56258

Van Hydraulics, Inc.
25 Gooding St.
Conklin, MI 49403

Van Meter Industrial LLC
850 32nd Ave SW
Cedar Rapids, IA 52404

Various Salaried Key Employees

Venture Measurement
150 Venture Blvd.
Spartanburg, SC 29306

Verizon Wireless
PO Box 25505
Lehigh Valley, PA 18002-5505

VWR Scientific LLC
PO Box 640169
Pittsburgh, PA 15264-0169

Walker National, Inc.
60C Solferino St.
Worcester, MA 01604

Walmart Stores, Inc.
c/o Bank of America
PO Box 60982
Saint Louis, MO 63160-0982

Waltz-Holst Blow Pipe co. Inc.
230 Alta Dale SE
Ada, MI 49301-9113

Dale Weeldreyer
5828 Crestwood Dr.
Fort Collins, CO 80528

Wells Fargo Bank, N.A.
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Wells Fargo Vendor Fin Services
PO Box 105710
Atlanta, GA 30348-5710

Wheelabrator Group
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Chicago, IL 60673

Whirl Air Flow Corporation
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Big Lake, MN 55309

Wynn Environmental
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YMH Torrance Inc.
PO Box 460
Hiawatha, IA 52233-0460

Zenar Corporation
PO Box 107
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Oak Creek, WI 53154-0107

Zhejiang Wujing Machine Mfg Co. Ltd.
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Wuyi County, Zhejiang Province
CHINA

Zhengzhou Hi-Tech Mechanical Industry Co
18 Yulan St.
Zhengzhou H. Zhengzhou
Henan Province 450001
CHINA

**United States Bankruptcy Court
Southern District of Iowa**

In re **Sivyer Steel Corporation**

Debtor(s)

Case No.
Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Sivyer Steel Corporation** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

FCF Partners LP
250 West Coventry Court, Suite 201
Milwaukee, WI 53217

☐ None [*Check if applicable*]

March 14, 2018

Date

/s/ Jeffrey D. Goetz

Jeffrey D. Goetz

Signature of Attorney or Litigant

Counsel for **Sivyer Steel Corporation**

Bradshaw, Fowler, Proctor & Fairgrave PC

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Des Moines, IA 50309-8004

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